

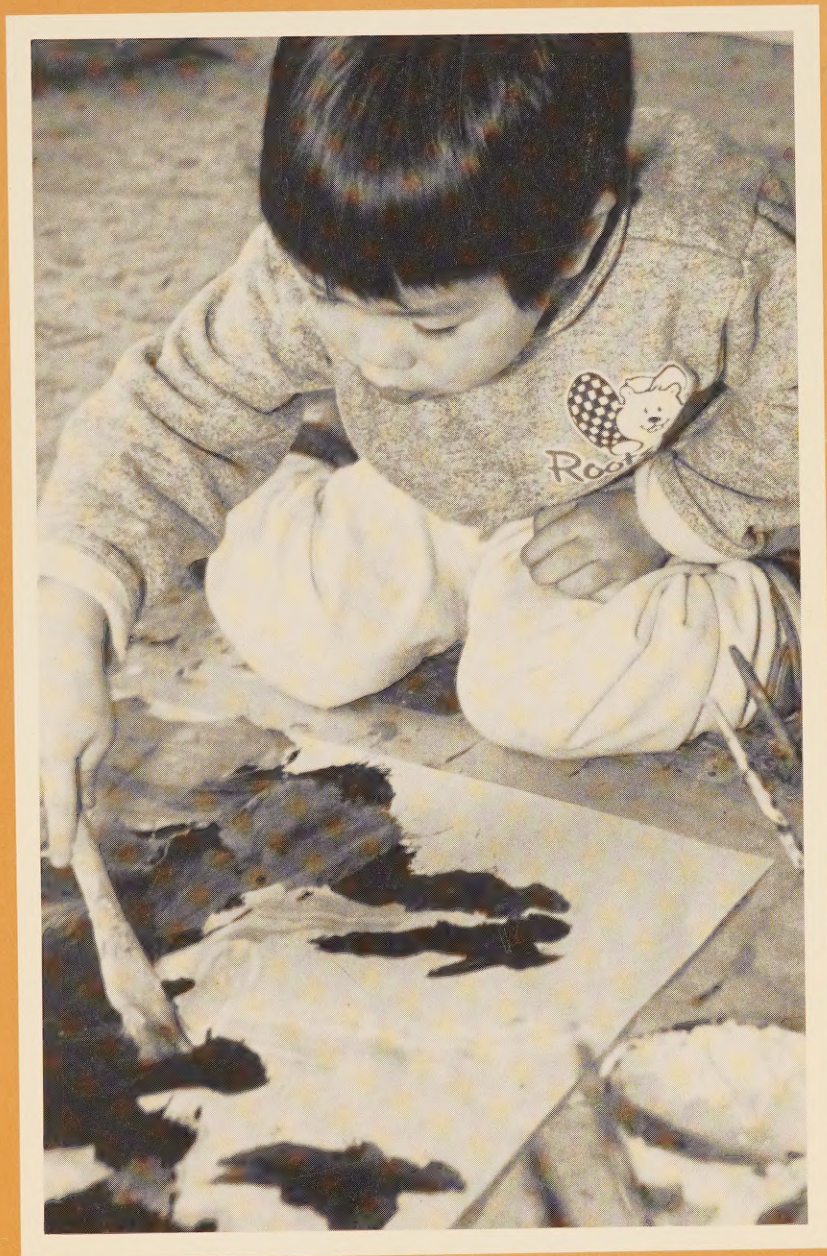


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Children First



Report of The Advisory Committee on Children's Services

November 1990

Children First

Report of The Advisory Committee on Children's Services



ANX-5357



Ontario

Minister Zanana Akande
Ministry of Community and Social Services
6th Floor, Hepburn Block
Queen's Park
Toronto, Ontario
M7A 1E9

Dear Ms. Akande,

We are pleased to submit the final report of the Advisory Committee on Children's Services.

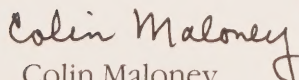
Our Committee was appointed on February 1, 1988 by the then Minister of Community and Social Services, the Honourable John Sweeney. Our mandate, in consultation with those responsible for social services to children at risk, was to articulate a vision of services to children that would be appropriate for the 1990's.

We found our mandate to be a challenge given the multiplicity and complexity of ministries which serve children, the thousands of agencies, the lack of systemic information, planning and coordination, the dramatic social changes giving rise to many social problems.

We are grateful to the numerous agencies, groups, organizations, individuals and youth who gave of their time and expertise. We would not have managed such a long and complicated process without the unstinting generosity and expertise of our staff, Terry Sullivan, Marc Topham, Carole Skinner, Maureen Reilly, Cheryl Hamilton and Katherine Scott.

The report recommends four goals. If these goals are achieved, Ontario will be much more able to ensure that children are treasured, supported and able to develop and grow to be healthy, contributing adults.

Yours sincerely,


Colin Maloney,
Chairman


Clare Brant


Dugal Campbell


Grant Campbell


Roger Delaney


Mary McConville


Ray DeV. Peters


Frances Picherack


Peter Ringrose

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Peter Ringrose

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Chapter 1

The Advisory Committee on Children's Services

Purpose and Mandate



In February 1988, the then Minister of Community and Social Services, the Honourable John Sweeney, announced the formation of the Advisory Committee on Children's Services. The Committee, chaired by Dr. Colin Maloney, Executive Director of the Catholic Children's Aid Society of Metropolitan Toronto, was charged with the task of developing a strategic framework leading to an agenda for action for services to vulnerable children, and youth and their families.

The Committee members were chosen to represent a broad range of experience in children's issues. Members have contributed their expertise in such areas as child welfare and family services, medicine, education, mental health services, nursing, the judicial system, native social services, psychology, and professional training. Members of the Committee are listed at the beginning of the report.

The Committee was asked to consider how to make the systems that serve children and their families in Ontario more responsive. In the changing social and economic environment of the 1990s, services must be flexible to meet changing needs and coordinated to ensure the most effective use of available resources. There is increasing concern about the children whose needs are not being met by the support systems that are now in place – those children who slip through the "safety net." Many of these children are ending up on the streets of the province's major urban centres, prey to exploitation, crime, and abuse.

The 1980s were a time of consolidation of specialized children's services in Ontario under a new legislative framework, the 1984 *Child and Family Services Act* (CFSA). In addition, services to young offenders were in transition under the 1984 federal *Young Offenders Act* (YOA) and subsequent amendments came in force and in 1980 amendments to the *Education Act* that mandated the provision of special education programs and services by school boards for all exceptional pupils. The Advisory Committee on Children's Services examined the impact of legislation and other current public policy initiatives in order to develop new strategies to improve the way that supports and services are provided to meet the needs of children more effectively in the 1990s. The Terms of Reference of the Advisory Committee are set out in full in Appendix A. Briefly, the objectives established for the Committee were:

- to develop directions for the broad range of public services in Ontario for vulnerable children and their families from a child development perspective;

- to develop prevention and early intervention strategies for vulnerable children and their families based on a collaborative, community-based system;
- to engage key stakeholders inside (the Ministry of Community and Social Services and other Ministries) and outside of government (publicly funded and non-publicly funded service providers, consumers, and advocates) in the definition and development of this strategic framework.

Committee Process

In developing a practical vision to help reshape children's services in Ontario, the Committee engaged in a series of consultations with experts in various fields related to child development and invited submissions from key organizations with an interest in services to children and their families. For example, the Committee heard presentations on the work of the Social Assistance Review Committee (SARC) and the *Ontario Child Health Study (OCHS)*; it was told about the roles of family physicians, child care workers, and the school system; and it heard from representatives of mental health agencies which work with children and from those who work with troubled adolescents, including young offenders.

The Committee gained considerable insight into the strengths and weaknesses of current services to children and families through the research that was conducted, the presentations made to the Committee, and the submissions received. Three background papers – on child welfare, legislative and policy responses, and harmonization of work and family life – were commissioned to assist the Committee in its work. A number of documents describing the state of children in Ontario and the scope of the service system for children and their families were prepared. (See Appendices D, E, and F.)

We also consulted regularly with a group of government officials from the Ministries of Health and Education, the Ontario Women's Directorate, and other branches within the Ministry of Community and Social Services (MCSS) including the Child Care Branch, the Family Support Branch, and the Services for Disabled Persons Branch. (See Appendix C.)

The Committee directed its efforts not only towards exploring options to improve the system of supports and services that intervene in instances where children are in difficulty but also towards promoting the healthy development of all children, particularly by supporting the family in its various forms and fostering new partnerships among those who are involved with children.

Overview of the Report

Chapter 2 presents the new realities and challenges that are facing families and the service systems that endeavour to provide supports to families. Chapter 3 develops the concept of children's entitlements which provides the philosophical basis for the Committee's work. Chapter 4 examines the current service system and its capacity to meet the changing needs of children and their families; it also presents new goals for a responsive system of supports and services.

The second part of the report explores each of the goals set out in Chapter 4. Chapter 5, 6, and 7 examine the organization of supports and services, economic measures and legislation respectively. Chapter 8 considers reorganization of the systems that govern the delivery of services, both within the community and at the provincial level of government.

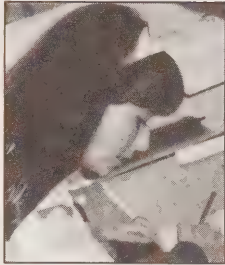
Recommendations for change are presented in each of these chapters. Chapter 9 concludes with our vision.



Chapter 2

New Realities, New Challenges

Introduction



The province of Ontario is at a crossroads as the 1990s begin. In earlier times, care and nurturing of children was seen as the exclusive responsibility of the family. The form of the family differed widely across ethnic, racial, and income groups, but the majority of children were raised by their parents and by other family members. More specifically, children were cared for by mothers who worked in the home. Fathers, for the most part, worked in the paid labour force, earning the sole wage that sustained the family unit.

The care of children was supported by community activities, such as municipal recreation programs and other services provided by voluntary groups and religious institutions. In addition, government services were provided to families in crisis. Parents, however, assumed the primary responsibility for ensuring the healthy development of children.

For many years the partnership between the traditional family, the community, and the government was adequate to meet the needs of the majority of children and their families. However, children today are growing up in a very different world, and as the world has changed, a gap has grown between the needs of children and the systems in place to meet those needs. The underlying conditions that supported the traditional family, particularly mothers who provided full-time care of children, have been changing over the past three decades.

The majority of women with young children now work outside the home. Their income is essential to the financial well-being of their families, and their contribution to the workforce is vital to the economic prosperity of this province. Consequently, it is not possible for most working parents to provide directly for all the needs of their children around the clock. Without different kinds of supports for the family to reflect these new realities, the gap between the supports that are needed and those that are provided will continue to widen.

We cannot look for the answers to today's problems in the past. Women are in the workforce to stay and the traditional family arrangement is no longer the norm. The wide acceptance of the myth of the traditional family has inhibited the development of a broader network of supports to assist families that are experiencing difficulties as they strive to meet the needs of their children.

In this chapter, we examine the nature and impact of the new social realities, particularly as they affect the family and child development. The first section of the chapter deals with the demographic, social,

Changing Family Realities

and cultural trends that are changing the way families live. The second section discusses current economic realities and their effect on children and families. The third section deals with the trends and challenges in problems affecting children. We have chosen to present statistical data for the years 1961 and 1986 where available in order to illustrate the magnitude of change in the family and the economy over this 25 year period.

1. Demographic Trends

In 1986, there were an estimated 2,289,700 children under 18 in Ontario. After almost two decades of decline, the child population is rising again as children are born to the baby-boom generation, particularly to those couples who postponed parenthood for careers. The population aged under 18 is expected to rise through the 1990s and peak in the year 2000.

However, as we head into the next century, children will be an even smaller percentage of the total population. From a post-Second World War high of 3.8 births per woman in 1961, the birth rate has now dropped below the replacement rate of 2.1 to 1.68.¹ It is estimated that children will constitute 20 per cent of the population in 2011, compared with 25 per cent in 1986.²

The advance of contraceptive technology, the expense of raising children, and the high incidence of family break-up are among the factors that contribute to smaller family sizes. The 1986 Census recorded more than one million Ontario families with children under 18.³ Of these families, almost half had one child, about 40 per cent had two, and only 11 per cent had three or more.⁴ Overall, the average family size fell from 3.6 persons per family in 1961 to 3.1 persons in 1986.⁵ Smaller family size means that children have fewer opportunities to develop sibling relationships or to share in caretaking responsibilities within the context of a growing family. Children in one-child families, in particular, will need opportunities to build relationships with other children outside the family.

The declining proportion of children in the population, particularly in relation to the growing proportion of elderly people, may prompt a shift in government resources from child and youth programs to services for senior citizens. But the needs of children will not diminish as their numbers decline, and there will continue to be demands for more and better services for families struggling to cope with changing social and economic conditions.



2. New Family Arrangements

Perhaps the most significant social change for children and families has been the proliferation of a variety of family arrangements. Whereas the husband-wife family is still dominant (87 per cent of all families in 1986, compared with 92 per cent in 1961), a study by Statistics Canada shows that the two-parent family can no longer be equated with the traditional family (a single male wage-earner and an at-home spouse). The Census shows that in Canada the traditional family has declined from 63 per cent of families in 1961 to 18 per cent in 1986⁶; blended or reconstituted families now comprise a larger proportion of two-parent families.⁷

In Ontario, more than 30 per cent of all first marriages now end in divorce⁸, and roughly half of the total number of divorces involve dependent children. More and more children today experience the separation of their parents, and these separations are occurring earlier in a child's life.

Whereas approximately one-quarter of the children born in the early sixties had experienced their parents' separation by the time they turned 20, only 13 percent of them saw this occur before they turned 10. In contrast, 23 percent of children born in the early seventies saw their parents separate by their tenth birthday, including 7 percent who never lived with their fathers.⁹

The number of single-parent families in Ontario – 290,755 in 1986 – has increased substantially, but the proportion of single-parent families has remained fairly constant over the last 25 years. In 1961, 8.4 per cent of Canadian families were led by single parents; in 1986, the percentage was 12.7.¹⁰ However, the reason for single parenthood has changed; most single parents used to be widows, but now there are more divorced women leading families. Between 1961 and 1986, the proportion of lone-parent families headed by a divorced person jumped from 4 to 30 per cent.¹¹ Similarly, there has been an increase in the proportion of unmarried women with children, from 4 per cent in 1961 to 13 per cent in 1986.¹²

The overwhelming number (over 82 per cent) of children in single-parent families live with their mothers.¹³ However, living in a single-parent family is not necessarily a long-term prospect. Many divorced people remarry or form new attachments within a few years of the initial separation. Consequently, one study has shown that children who reached age 10 during the early 1980s and whose parents were separated are increasingly likely to experience more than one family arrangement.¹⁴

While changes in life circumstances are always stressful for children, the changing constellation of family relationships does not necessarily entail long-term emotional and psychological harm. Rather, studies have shown that it is the factors associated with and following the divorce – such as the continuing relationship between the parents, the emotional availability of the custodial and absent parent, the provision or lack of support systems for the family, or a decline in the family's standard of living – that result in damage to the emotional and physical well-being of children.¹⁵

The changing composition of families also poses challenges for the service network that deals with children and families under stress. Different family forms and lifestyles require different types of supports.

3. Cultural and Regional Diversity

Ontario's children are an increasingly diverse group. The cultural, racial, and ethnic diversity of the province provides opportunities for existing services and institutions to broaden their understanding of the needs of children and to provide culturally sensitive supports to children and their families. In addition, regional disparities in Ontario require responses tailored to meet the unique needs of different communities.

- *Native Children:* Native children constitute a special group.¹⁶ Among the 167,400 native people (ethnic background of North American Indian, Metis and Inuit) who make up an estimated 1.9 percent of the total population of Ontario, 55 per cent are under the age of 25, compared with 37 per cent of the general population.¹⁷ The single largest age group is those under 14 years. Unlike the general population, in which the proportion of children is declining, the native population includes an increasing proportion of children. Native children are also unique in that they live in the poorest of communities in Ontario and have higher incidences of infant and child mortality, suicide, and physical and mental health problems, which demand special attention and support.

The Ontario government has made a commitment to negotiating self-government agreements with native communities, and MCSS has supported giving native communities more authority over the design and operation of social services. There has been a start in this direction in children's services with the formation of three native child and family services agencies in the North.

- *Franco-Ontarians:* In 1986 422,770 Ontarians identified French as their mother tongue.¹⁸ The provincial government has taken action to provide services in French where numbers warrant. The *French*

Language Services Act (FLSA), passed in 1986, designated certain areas of the province where provincial government services, including children's services, must be delivered in French as well as English. Francophones represent a significant proportion of the population of certain regions and communities in Ontario. Much work remains to be done to reach the goals of the *FLSA* in meeting the needs of French-speaking children.

- *Immigrants*: Over half of the immigrants currently coming to Canada choose to live in Ontario. In 1986, almost 50,000 immigrants settled in Ontario, but current levels are much higher: 104,000 in 1989. A large proportion stayed in the Greater Toronto Area.¹⁹ Of this number, roughly 20 per cent were children under 19.²⁰

Successive waves of immigration have substantially changed the ethnic and racial composition of Ontario's population. In 1962, 77 per cent of immigrants came from Europe; in 1986, fewer than 30 per cent did.²¹ About 50 per cent of new immigrants speak neither English nor French.²²

Almost 25 per cent of Ontario's current population were born outside of Canada, compared with the national average of 16 per cent.²³ The changing ethnic and racial composition of the population creates a need for family services that recognize varied backgrounds and customs. Many newly arrived families adjusting to life in Ontario require help to make the transition. Visible-minority families may also find themselves having to combat the effects of systemic discrimination.

- *Regional Variations*: The majority of the province's citizens reside in southern Ontario, in large urban centres. The population of the Greater Toronto Area is expected to grow to 4.8 million by the year 2000, an increase of 1.1 million from 1986.²⁴ In the province's larger cities, the availability of affordable housing for low-income families, particularly those with children, is a growing problem. Most immigrant families settle in the Greater Toronto Area, putting pressure on services to adapt to linguistic and cultural needs. Large urban communities tend to have a broader range of social services than rural and smaller communities. However, it is also more difficult to coordinate services in large centres than in smaller centres, where many service providers in different fields often know one another.

In rural areas and in communities in northern Ontario, there are different challenges, such as overcoming isolation or meeting the needs of the native and francophone children. There are fewer services, and distances are great when compared with those in southern Ontario. The ethnic distribution in the North also presents a unique profile. Fifty-five per cent of Ontario's status Indians and



Economic Realities

one-third of Ontario's francophones live in the North. In general, these communities are poorer and are subject to more economic instability, which exacerbates social problems and impairs the ability of individual communities to address their own needs.

Northern Ontario has consistently exceeded, often by factors of two to four times, the province's suicide rate, infant mortality rate, illiteracy rate, and rate of children taken into care. Between 1971 and 1985, modernization of the North's major industries resulted in the loss of 20,000 jobs, exacerbating the high rate of unemployment among young people. Long winters and limited recreational facilities have contributed to high drug-dependency rates and to the phenomenon of "cabin fever," which places considerable stress on families.²⁵

These contrasts between conditions in the North and those in southern regions of the province illustrate the need to tailor supports and services for children and their families to the characters of individual communities. The rapidity of changing family realities more generally illustrates the need to rethink the way the current system of supports and services has been organized. These changes in large measure are related to equally profound changes in the economic base of the province, described below, which compound the necessity to re-examine how all members of a community and the government can best support children and their families.

Social factors such as demographic change and divorce are not the only forces influencing society. Economic forces are fuelling major changes in society, and these new realities are in turn placing new pressure on children and families and creating new demands for supports and services that fit the diverse realities of family life in the 1990s. Most women now work outside the home. This fact, coupled with the erosion of the economic position of many working families, has radically altered traditional arrangements for the care of children that relied upon the presence of a mother at home and the ability of the father to support the family.

The following section will look at women's role within the workforce and the often precarious financial position of young families and sole-support parents attempting to meet the needs of their children. The consequences of this poverty and economic deprivation for children are also outlined.

1. Working Families

The mass entry of women into the workforce, including mothers with children under 12, has produced fundamental social and

economic change. In 1961, 29 per cent of Canadian women over 15 worked outside the home.²⁶ By 1986, the percentage of all women who worked in the labour force had reached 58 per cent,²⁷ and that figure is expected to reach 80 per cent by 1996.²⁸ The surge of women into the labour force represented two-thirds of all employment growth in this country between 1975 and 1989.²⁹

Families today depend on the earning power of women, many of whom are mothers of young children. The most dramatic increase in women's participation in the workforce has been, in fact, among women in the peak child-bearing years: close to 80 per cent of Ontario women aged 20 to 44 are currently in the workforce. This number is likely to increase.³⁰ In December 1988, 57 per cent of mothers whose youngest child was less than three years old were working outside the home. Sixty-four per cent of mothers whose youngest child was three to five years old were in the labour force, as were 74 per cent of mothers with children aged six to 15.³¹

Most women work out of economic necessity. In 1979, the National Council of Welfare estimated that the number of families living in poverty would increase by 51 per cent were it not for the wages that women contribute.³² By 1986, almost 65 per cent of families depended on a woman's financial contribution to avoid poverty. The Economic Council of Canada has estimated that "if families with heads aged less than 65 had had to depend solely on the husband's earnings, there would have been almost no growth in real family income between 1973 and 1986."³³ The financial contribution of women to the financial well-being of families and children is clear.

The entry into the labour market of a significant proportion of the female population has coincided with some fundamental changes in the economy. Increased global competition and the impact of new technologies are causing major economic restructuring. In the new information-based economy, the service sector has become the fastest-growing segment, and it is in the service industries that the majority of women are employed. The service sector is expected to continue to expand; it is estimated that 80 per cent of all new jobs that will be created in the next decade will be in service industries.³⁴ At the same time, the rate of growth in the Ontario labour force is slowing down. In the years ahead, the economy will need female workers to fill these new jobs.

But there are concerns about the kinds of jobs that will be available. A recent report of the Economic Council of Canada, *Good Jobs, Bad Jobs*, pointed to a growing gap in the service sector between well-paid jobs requiring high skill levels and lower-paid, lower-skilled jobs.

It warned of an increasing gap between those who benefit from technology and economic adjustment, and those who are disadvantaged in the labour market. "The implication of our research is that the labour market is offering economic security to fewer Canadians," the report concluded.³⁵ The Social Planning Council of Metropolitan Toronto, for example, found that 92 per cent of all jobs created from 1981 to 1986 were paid less than \$6.76 an hour, and the fastest-growing income category was for jobs paying less than \$5.25 an hour.³⁶

The impact of structural changes in the economy is keenly felt by women and young workers. On average, women earn two-thirds of what men earn; women are over-represented in service-sector jobs that pay poorly and offer little chance of advancement. Many of the women who find themselves supporting children alone lack the education or employment skills necessary to obtain a well-paying job. Women are more likely than men to have restricted job choices, more part-time work, low pay, and periods of unemployment.³⁷

A 1988 study by Statistics Canada revealed the impact of economic change on the wages of young workers. The study found:

- A substantial downward shift in the wage distribution of full-time jobs among 16 to 24 years olds in *every* industrial sector and occupational group in the economy, including the high paying areas.
- Among 25 to 34 years olds, there was movement out of the highest paying towards the middle paying jobs in virtually every industrial sector and many occupations as well. These phenomena were widespread and dramatic (across all regions and for all levels of education).³⁸

There are also implications for family incomes in the tax system. For example, the Ontario Tax Reduction Program was enriched in the 1990 provincial budget and targeted specifically at children and persons with disabilities. However, the overall impact of the federal and provincial tax systems on low-income families has been adverse in the latter part of the 1980s. It was estimated in 1988 that two-earner couples with two children and an income of \$25,000 faced combined income and sales tax increases of 37 per cent; a family of four earning \$40,000 faced an 18-per-cent increase, while the increase for a \$100,000-income family was only five per cent.³⁹

The implications of these economic trends for children and their families are considerable. Families with both parents working outside the home require new and innovative supports to help them cope with the stress of managing a full-time job and raising children. Many working mothers juggle home and work responsibilities remarkably

well, but there is a growing demand for supports that recognize the dual role of parent and wage-earner that so many women are now performing.

2. Families and Poverty

One of the most significant features of today's economy is the increasing number of children growing up in poverty. The poverty rate among Ontario families fell from 11.4 per cent in 1979 to 8.7 per cent in 1986.⁴⁰ This is a positive trend, but there were still 287,000 children under 18 living in poverty in Ontario in 1986. And although Ontario had the lowest child poverty rate in Canada in 1986 – 12.6 per cent of the province's children are poor, compared with the national average of 17.1 per cent – those children represented just over one-quarter of all of Canada's poor children.⁴¹

It is important to note that as the overall poverty rate for families has been falling, the rate for some types of families has been rising substantially. In families where the family head is under 25, the poverty rate rose from 16 per cent in 1975 to 30 per cent in 1986.⁴² The statistics for families headed by women supporting children alone are even more grim: among the 64 per cent of sole-support mothers who were employed or looking for work in 1986, over 55 per cent were poor.⁴³ Sole-support mothers must usually choose between life on social assistance or life among the working poor. *Transitions*, the report of the Social Assistance Review Committee, noted that a significant number of poor children live in families who rely on social assistance.⁴⁴

Family breakdown brings a threat of economic deprivation for children. For the 87 per cent of divorced women who retain custody of their children, the financial consequences are, on average, a drop of 73 per cent in their standard of living. In contrast, divorced men experience an increase of 42 per cent in their standard of living.⁴⁵ Child support awards are usually inadequate and bear little relationship to the actual costs of raising children. The most common finding of studies of support awards across jurisdictions is that judges appear to have a set figure in mind, regardless of the number of children or the non-custodial parent's ability to pay.⁴⁶

Furthermore, a study of Ontario family court cases found that 63 per cent of orders were in full or partial default within four months, and by the end of the first year, 87 per cent were in some degree of non-compliance. After the first year, 60 per cent of the non-custodial parents did not contribute anything to the financial support of their children.⁴⁷ Refusal to pay has consistently been identified as the main



reason for child support failures. Some jurisdictions, including Ontario, have moved to garnishee wages of delinquent spouses in default cases.

For sole-support mothers, parenting is especially difficult: they face the combination of low earning capacity and high child-care costs. Teen mothers are particularly vulnerable. The birth rate for women between the ages of 15 and 19 had declined from 69.1 births per 1,000 in 1961 to 20.5 per 1,000 by 1986,⁴⁸ but teen mothers still have a great need for social and economic supports. Children born to teen mothers are at higher risk of suffering low birth weight, accidents, congenital sexually transmitted diseases, and child abuse and neglect. There are equally significant consequences for the mothers. Women who give birth as teenagers are less likely to finish high school or pursue higher education than women who delay child-rearing until at least 20. In addition, women who are teen mothers are more likely to be unemployed or working in poorly paid jobs.⁴⁹

Poverty has been linked to physical and mental health problems in children. Poverty by itself is not a specific index of problems, but poverty in combination with other risk factors, such as chronic illness, family dysfunction, or poor housing, creates conditions that foster poor mental and physical health. Living in poverty puts extra pressures on families struggling to provide a comfortable home environment for children. Finding good housing, for example, is an acute problem in major urban centres such as Metropolitan Toronto.

The *Ontario Child Health Study* (OCHS) found that children who lived in families receiving social assistance were 2.8 times more likely to develop disorders than children who did not. Those who lived in families with low incomes or with a single parent were 1.7 times more likely to experience psychiatric disorders.⁵⁰

Poor children are more likely to suffer from a variety of physical health problems than children living in families with higher incomes. For example:

- The infant mortality rate in 1981 for children born to families with incomes in the lowest one-fifth of Canadian incomes was 1.5 times the rate for children born to families in the highest one-fifth of incomes.
- The infant mortality rate for Indian babies was twice the national average in 1983; the mortality rate for Inuit babies was four times the national average. The post-neonatal (one-month) mortality rate for Indian babies was 3.5 times higher than the national rate and four times higher for Inuit babies.
- Poor women are more at risk of having low birth-weight babies, and low birth weight is the leading cause of infant mortality.

Children's Problems: Trends and Challenges

- In 1981, for children aged one to 14 years, mortality rates for boys from families with incomes in the lowest one-fifth were 1.9 times higher than in the highest income group; rates for girls were 2.5 times higher.
- In 1982, the mortality rate for native children under four years was almost three times the rate for non-native children; the accidental death rate for native children aged five to 14 was three times the national average.
- Suicide and homicide rates are three to four times higher for poor children and youth than for children and youth from high-income families; the suicide rate for native children ranges from five to 11 times the national average.
- Poor children are much more likely to have chronic illnesses or limitations of normal functions than are children living above the poverty line.⁵¹

While the incidence of poverty is not the sole cause of developmental problems among children, it is a major contributing factor. If society is to ensure the well-being of all children, the cycle of economic disadvantage among poor families must be offset to give children a better opportunity to lead fulfilling and productive lives.

The accumulated social and economic stresses that families are now experiencing, as described throughout this chapter, are contributing to problems for children. It is difficult to attribute any given problem to one or more factors, but there was a consensus among service providers who addressed the Committee that they are seeing more troubled children and families. The following section looks at some of the key struggles that children and families are now facing.

Although it is possible to discuss problems such as drug abuse, homelessness, and depression among children and youth as separate issues, it should be recognized that these problems are often interconnected and that many children suffer from more than one at the same time. For example, a child who is abused or neglected at home or has lived in a series of unsuccessful foster care placements may drop out of school and run away to live on the streets. The same child may be drawn to experiment with illegal drugs, become depressed, and attempt suicide. The factors that put children at risk tend to be cumulative.

1. Child Neglect and Abuse

Child neglect and abuse, including sexual abuse, is more common than had once been thought. It cuts across social classes and ethnic and racial groups. There has been a large increase in the number of

cases reported during the past decade, notably in case of child sexual abuse. Physical, psychological, and emotional abuse skews a child's entire development and radically reshapes how children view the world and themselves in relation to others.

It is difficult to determine the number of children who have been abused, but the number of incidents reported to Children's Aid Societies provides one measure. In 1989, Children's Aid Societies received more than 15,000 reports of alleged child abuse. Of this number, 51 per cent of the cases were for alleged physical abuse, 46 per cent for sexual abuse, and three per cent for emotional abuse.⁵²

Estimates of the prevalence of sexual abuse of children indicate that one in four girls and one in ten boys are the victims of sexual abuse. In 85 to 90 per cent of the cases, the abuser is someone known to the child, such as a parent, a relative, or a person who works with children.⁵³

Neglect, physical injury, and emotional maltreatment of children is likely even more prevalent than sexual abuse. A child may be considered to be at risk from neglect because he or she lacks medical care, emotional support, adequate parental supervision, or other supports. However, these specific risk factors may be part of the larger social problem of poverty.⁵⁴

Statistics on the reasons why children flee their homes or come into the care of the state indicate that neglect is a major cause. Neglect affects all ages, but it has the most detrimental effects when it goes on for a prolonged period. For older children, sexual and physical abuse and emotional maltreatment are commonly cited as reasons for leaving the home. In a small number of cases, neglect and abuse lead to a child's death.

A number of factors that contribute to child abuse and neglect have been identified. Family factors include substance abuse, a history of family violence, high levels of family discord, and inadequate parenting in the previous generation. Social and economic factors include inadequate monetary support, unemployment or underemployment, and lack of social services.⁵⁵

Awareness and reporting of child abuse and neglect have increased in recent years because of government programs to increase public understanding and concern. However, the programs to deal with the abusive or neglectful behaviour have not expanded quickly enough nor improved sufficiently to meet all the need, if indeed this is possible. There are long waiting lists for those seeking help. In the short term, the challenge is to address the issue of treatment for both the abused and the abusers. Long-term solutions are also needed to support

healthy family relationships and address those social and economic conditions that foster violence in our society.

2. Children and Family Violence

Children are also at risk of developing significant problems when they witness violence, particularly battering of their mothers. Estimates vary on the incidence of family violence in its various forms. One estimate is that 1 million Canadian women are battered each year.

In 1985, a study of 110 transition houses in Canada found that 20,291 women were accommodated, of whom 15,730 had been physically, psychologically, or sexually abused by their husbands or partners. If we extrapolate those figures to the 230 crisis shelters across Canada, about 42,000 women were accommodated, 33,000 explicitly because of battering. In addition, it is estimated that another 42,000 women were turned away from shelters because of lack of space.⁵⁶

Seventy per cent of the women who sought help in shelters or transition houses brought their children with them.⁵⁷ It is estimated that 10,000 children spend at least one night in a shelter every year. Children are present during 80 per cent of incidents of wife assault. In one out of four incidents, the children of assaulted women are also hurt or threatened.⁵⁸ Studies of children from violent homes indicate the devastating impact that living in a violent home can have on children. Some children emulate the aggressor; others become withdrawn and try to avoid attention. Some older children take on a parental role with younger siblings and are often overwhelmed by their responsibilities. Many children suffer from anxiety, and sleeping and eating disorders and have problems at school. A significant proportion of children from violent homes are persistent truants.⁵⁹

Some children are able to translate experience with violence in the home into positive attitudes to non-violence and emerge from the turmoil with their self-esteem intact. Evidence from transition houses indicates that the “survivors” are children who have been allowed to vent their fear and anger about the abuse, who feel valued by the family and whose developmental progress has been rewarded, who are helped to understand their ambivalent feelings for the abuser and who are given a sense of reasonable limits on their own behaviour. The attitude of the mother is crucial to the healthy development of the child, but others can help too. Sometimes these children receive support and understanding from outside the immediate family, from relatives, neighbours, friends, and teachers.

In addition to experiencing violence at home, children are also influenced by a culture where the evidence of violence is widespread.⁶⁰



To prevent violence in the home, we must look at aggression in our culture at large; without this wider focus, we have little hope of lessening the corrosive impact of social and domestic violence on children.

3. Prenatal Care and Premature Births

Remarkable progress has been made in the survival of premature and low-birth-weight babies. However, a number of these children suffer long-term impairment, sometimes as a result of the very technological interventions that saved their lives. As more children with serious disabilities survive, there is increased pressure on medical and educational services to meet their needs.

Low birth weight is the leading cause of death in the perinatal period. A low birth-weight baby is three times more likely to develop a permanent impairment, 40 times more likely to die in the first month of life, and 20 times more likely to die in the first year of life.⁶¹

Neonatal and perinatal mortality seems to have stabilized. The absolute numbers of babies born at less than 1500 grams decreased by 0.8 per cent between 1971 and 1987, although the proportion of babies born with this weight remained constant. Data on birth by gestational age reveal that births at less than 28 weeks gestation and between 28 and 34 weeks have remained relatively constant. Roughly 98 per cent of all live births occur after 35 weeks' gestation.⁶²

The prenatal care a woman receives is the second most important determinant, after socio-economic status, of birth outcome. For women who do not receive adequate prenatal care, the proportion of newborns with low or very low birth weight is three to six times higher than for women receiving adequate care. The challenge is to find ways of improving prenatal care for greater numbers of women in order to reduce the number of babies whose life chances are jeopardized at birth by low birth weight and prematurity.

4. Children and Youth with Disabilities

Only a few years ago, severely disabled children could not be expected to live beyond an early age. Advances in medical technology now save the lives of children who would not have survived even 10 years ago. Currently, an estimated 114,000 (six per cent) of Ontario children 14 years of age and under are identified as disabled, according to the Canadian Health and Disability Survey. About seven per cent of the age group between 15 and 24 have a disability.⁶³ The 1986-87 Health and Activity Limitation Survey estimated that 169,730 children and young adults up to 24 years of age had one or more disabilities. Of this number, 98,225 children were under 14.⁶⁴

The vast majority of children with disabilities live with their families. The Ministry of Community and Social Services has stated its commitment to providing a range of community-based services to support these families and their children. The large regional facility is becoming a thing of the past as the network of home support services grows and opportunities for independent living expand.

The challenge is to ensure that the appropriate supports and services are available to families and children in their own communities, and that they emphasize the potential of persons with disabilities.

5. Suicide Rates

Adolescent suicide rates have increased throughout the 1970s and 1980s. In 1985, the reported rate of successful suicides was 8.5 deaths per 100,000 teenagers aged 15 to 19. The rate was 14.7 deaths per 100,000 for boys and 2.0 deaths per 100,000 for girls.⁶⁵ In addition, an unknown number of accidental deaths (from drug overdoses, for instance, or single-occupant automobile accidents) may be disguised suicides. Studies indicate that female teens attempt suicide more often, but that male teens are more likely to succeed in killing themselves. Most often, suicide has been found to be related to clinical depression.⁶⁶

Of particular concern are the statistics on adolescent suicide in the native community. The rate among native children aged ten to 14 was 7.4 deaths per 100,000, as against 1.5 for this age group across Canada. For teens from 15 to 19 years, the suicide rate for native youth was 81.6 deaths per 100,000, compared with 12.3 for the whole of Canada in this age group.⁶⁷ These statistics graphically illustrate widespread despair and cultural alienation among the youth of Canada's First Nations.

There are few programs in place to coordinate intervention in cases of suspected suicide or suicide attempts. In general, not enough is known about the warning signs that precede a suicide attempt.

One American study documented that most teen suicides occur in the family home between 3:00 and 6:00 p.m.⁶⁸ This suggests that there is a need for more adult-supervised activities for youth after school. Since many parents are not home from work when young people get out of school, it is unlikely that families can provide this attention. Broad strategies must be developed to assess the magnitude of the problem of suicide among children and youth and develop effective prevention and treatment programs.

6. Drug and Alcohol Use

Drug and alcohol use can have severe consequences for youth, their families, and society at large. Beyond the danger to the health of a child or youth, social problems such as truancy, law-breaking, and

aggressive behaviour have been linked with chemical dependence. Early dependence sets the stage for continued use or abuse into adulthood. While it difficult to ascertain with accuracy the actual rate of drug and alcohol use among teenagers in Ontario, Addiction Research Foundation (ARF) studies show that 22 per cent of youth aged 11 to 19 reported using illicit drugs at least once in 1987.⁶⁹ However, there has been an overall decline in general use and the number of drugs used over the past decade.

ARF examined the use of 17 substances between 1977 and 1987. The use of three, including marijuana, declined significantly; nine showed marginal declines; two remained unchanged; and three increased slightly.⁷⁰ However, these trends mask the scope and nature of the problem. Researchers and representatives from the justice and social service systems have expressed concern that use is spreading to younger children and that the culture of violence and crime associated with the movement and sale of illegal drugs is reaching into the schools and poor communities, perpetuating the cycle of disadvantage for many high-risk children and youth.

Awareness of the problem of substance abuse has grown in recent years. This challenge has been recognized and taken up by governments, community organizations, and many parents. The government recently announced mandatory drug education in Ontario schools. Some community initiatives have been developed to respond to the sale of drugs and alcohol to minors and to increase early detection of use. Prevention programs, aimed particularly at the younger children who are experimenting with drugs, are being developed, and parents are being taught how to “drug-proof” their children. The efficacy of these programs has yet to be determined.

7. School Dropouts

The *Ontario Study of the Relevance of Education, and the Issue of Dropouts*, commissioned by the Ministry of Education, found that about one-third of all secondary-school students drop out of high school before finishing grade 12. This staggering finding is a sign of failure of the school system and a gauge of wasted opportunity for individuals and for Ontario society as a whole. As traditional markets for unskilled and semi-skilled labour shrink and as the skills and literacy level demanded of workers increase, many Ontario youth will not have the education and skills that will enable them to find satisfying work at good wages. This will affect not only the opportunities for individual workers but also the ability of the workforce as a whole to provide the necessary productive labour for the province's economy.

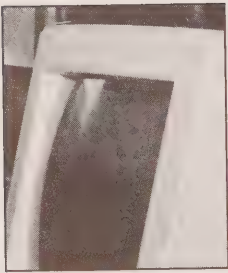
Despite the reality that fully a third of incoming students will not complete their secondary-school education, children entering high school continue to expect that they will pursue post-secondary education. A survey sponsored by the Ministry of Skills Development in 1988 found that only nine per cent of incoming students expected to work immediately after high school, whereas 45 per cent of those polled wanted to go to university. In fact, 64 per cent (including dropouts and those who received their high school diploma) went directly from secondary school into the workforce; only 18 per cent went to university; 14 per cent enrolled in a community college; and seven per cent went into an apprenticeship program.

The Ontario study of dropouts noted that students drop out for a variety of reasons, including poor school performance. However, although studies show a strong correlation between learning difficulties and the likelihood of dropping out, the study estimated that at least 40 per cent of dropouts had averages of C or better.⁷¹ The study found a strong link between the socio-economic status of the student's family and the likelihood of dropping out. As well, children from single-parent households were disproportionately represented among dropouts.

The study also found that students from the general-level and basic-level programs are much more likely to drop out than students taking an advanced program. Advanced students have a 12-per-cent dropout rate, while the rate is 62 per cent among students taking mainly general-level courses and 79 per cent among students taking basic-level courses.⁷²

The *Ontario Child Health Study* has been useful in illustrating the link between the likelihood that children will experience difficulty in school and withdraw and the socio-economic position of their families. The average rate for poor school performance within the general school population of children is 14 per cent. The groups at highest risk are girls living in single-parent families and girls in families receiving social assistance. The rate for these groups was over four times the rate among girls in families not receiving social assistance.⁷³ The dropout rate among poor youth was 2.2 times greater than among non-poor youth.

Dropouts may be able to find employment when they leave school, but their long-term earning prospects are dismal. The evidence indicates that the gap between the average wages of high school graduates and of dropouts has widened during the 1980s. The consequences for school failure have long-term implications for children and their future economic security.



Something is wrong when one-third of the “clients” of a service system as essential as education decide to give up on it. This is symptomatic of a larger failure by society to adapt to the needs of children and families. Economic, systemic, and personal factors all contribute to the dropout rate in Ontario – which means that improving the retention rate of students in Ontario high schools, especially for students from poor families, cannot rely on a single solution.

8. Street Youth and Homelessness

Most of the children and youth who end up on the streets of Ontario’s major urban centres have left home to escape conflict, neglect, or abuse. They are an especially vulnerable group of young people. They are at risk because of their lifestyle on the street. Many of them have already been through the formal systems of care for children and have not been helped. They have dropped out of school, and some make money through prostitution and the illegal drug trade. To mainstream society, they are “lost” children for whom the safety net has provided no safety.

The *Missing Children Research Project* studied missing children cases reported to the police in Metropolitan Toronto, Metropolitan Montreal, Edmonton, and Surrey, B.C. Of the 12,446 missing children reported over a 12-month period, 86 per cent were runaways. Twenty-nine per cent of the children identified as runaways were repeat runners.⁷⁴

The study found that the largest proportion of runaway children (71 per cent) ran away from the home of a parent or guardian; 23 per cent left an institution or treatment home, and six per cent ran away from a foster home.⁷⁵ Eighty per cent of the repeat runners were reported by caseworkers to have been involved in delinquent acts; 69 per cent were using drugs. Fourteen per cent had been physically abused by the father, 12 per cent by the mother or a sibling; and 10 per cent had been sexually abused. Almost two-thirds had been involved in parent-teen conflict, and 33 per cent were rejected emotionally by parents.⁷⁶

Many of these children are returned to their homes, only to run away again. The 1989 report *Street Youth and AIDS*⁷⁷ notes that inter-related factors of family conflict, stress, poor school performance, and interpersonal conflict account for why most adolescents run away. The study found that many of these youth are intermittently on the streets, in and out of emergency hostels or the family home. Their heavy drug use and high level of sexual activity (many are involved in prostitution) make them a high-risk group for the contraction and

transmission of AIDS. Many expressed feelings of loneliness and despair; some had contemplated suicide.

A major concern is the young people who have received a variety of services from schools, counselling agencies, the courts, and the child welfare system, and for whom nothing has worked. It should be emphasized that almost 30 per cent of the runaways studied in the *Missing Children Research Project* had fled from an institution, treatment home, or foster home.

It should also be noted that runaway teens are not the only group of children who experience homelessness. Other children whose families cannot afford adequate housing end up in shelters. Unlike street youth, these children still have their families, but they do not have a home. Unfortunately, one of the responses to inadequate housing has been to take children, especially young ones, away from their families and place them in care. But this results in disruption of the family. The challenge is to meet both needs of children – for a home and for a stable family environment.

Conclusion

The Committee believes that the trends in children's problems indicate that a new approach to meeting the needs of children and families is required. Although there has been a decline in the rate of child poverty over the past decade, for instance, the position of women and young parents is arguably deteriorating as the number of well-paying jobs decreases. Similarly, we have made inroads in reducing the number of low-birth-weight babies; yet other risk factors, notably abuse and dropping out of school, persist despite the sophisticated systems of service that have evolved in Ontario.

It is imperative to forge new relationships to care for children in light of changing social and economic realities. In the next chapter, we present our philosophical belief that it is also morally imperative to create the conditions within which all children can develop to their fullest potential. A commitment to provide for children's needs must be the cornerstone of efforts to transform the system of supports and services to better meet the changing needs of children and their families.

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73. Ontario Child Health Study, *Children at Risk*, p. 9.

74. Joan Fisher, Ontario Ministry of the Solicitor General *Missing Children Research Project*, Vol. 1, Findings of the Study, A Focus on Runaways, No. 1989-07, p. iv.

75. *Ibid.*

76. *Ibid.*, p. v.

77. J. Radford, A. King, W. Warren, *Street Youth and Aids* (Social Program Evaluation Group, Queen's University at Kingston, 1989).



Chapter 3 *Caring for Children*

Introduction



The evidence presented in Chapter 2 illustrates that it is essential to create new relationships to care for children in the face of the social and economic stresses with which families now struggle. In this chapter, we discuss the philosophical underpinnings that have guided our deliberations on new ways to meet the needs of children in Ontario. In brief, we believe that our children are our future; therefore we all have a shared interest in the quality of their lives and the opportunities they are given to become healthy, happy and contributing members of society.

The intrinsic value of children must be reflected in the priorities and commitments of all participants within the public, private, and voluntary sectors. A caring society is one that is capable of putting the well-being of children above vested interests, whether these be political, ideological, professional, or sectoral.

The Entitlements of Children

We now know a great deal more than we once did about the conditions that imperil healthy child development. We also know that problems that occur in childhood can impair adult life and that the beginnings of many lifelong problems lie in childhood.

Although the precise characteristics of those groups in the community whom we identify as vulnerable change as society changes, many of the key factors that place children at risk have been identified over the past 50 years.¹ Risk factors for poor child health include:

- interrupted or inconsistent care from parental figures;
- rejection or lack of affection from parental figures;
- physical or sexual abuse;
- emotional deprivation;
- physical neglect;
- family conflict;
- material poverty.

Vulnerable children are defined as those at risk for significant and enduring social, emotional, or behavioural problems. These children are more likely to be dependent on public resources over the course of their development, particularly through the child welfare, social assistance, corrections, or mental health service systems. However, it is our view that all children are potentially vulnerable because they depend on adults to meet their basic needs. Children may develop emotional or behavioural problems when their own physical or emotional resources are unable to meet the challenges of their social and physical environment. Problems also arise when the larger social,

political, and economic systems within which children live jeopardize the family's resources and create stress on the family unit.

Providing appropriate care and required resources to all children, then, has critical significance for their long-term physical, intellectual, and emotional well-being and their development into independent, healthy adults. We believe that society has an obligation to organize a high-quality response to address the needs of children, in order to increase the likelihood that they can grow to realize their potential, and become healthy, contributing members of our society. Fundamental to a transformation of services for children is a commitment to the essentials of adequate care for all of Ontario's children.

Statement of Entitlements

The Advisory Committee on Children's Services believes that all children have fundamental entitlements to:

- affectionate care from consistent, caring and competent parents and other care-givers;
- conditions of care that permit normal physical and emotional growth and development;
- freedom from family and societal violence, physical harm, sexual molestation and exploitation, neglect, emotional harm, and abandonment;
- the support of all individuals or groups whose work and lives touch children and whose obligation it is to promote the best interests of the child;
- necessary health care and treatment, adequate nutrition and housing;
- educational challenges and opportunities;
- opportunities to participate in their own cultural community, to profess and practise their own religion or to use their own language;
- opportunities to participate in the community and society as a whole;
- protection of the above entitlements by society as a matter of substantive as well as procedural right.

Entitlements Versus Rights

The Committee has chosen to adopt the concept of children's entitlements as opposed to children's rights. We believe that the concept of entitlements captures both the intent of and the rationale for the Committee's recommendations for children's services.

The concept of "rights" has taken on an adversarial tone because legal challenges mounted by civil rights groups, notably groups fighting discrimination on the basis of sex or race. In our opinion, the equation of rights with the legal system, and an emphasis on what are known as "rights of procedure" over "rights of substance" have obscured more constructive collaboration to break down the barriers to social justice for all people, including children.

By rights of procedure we mean provisions of due process, including the right to informed consent for treatment or the review of involuntary commitments to mental health institutions. Rights of substance, on the other hand, refer to the right of an individual to the necessities of life: food, shelter, and healthy development.

In Canada, the past ten years have seen a decisive shift in thinking about children and about the rights that they at times have enjoyed and at other times have been denied. Generally, there has been a move to treat children as rights-bearing persons with individual developmental needs rather than the objects of paternalism. Various examples of human rights legislation, notably the *Canadian Charter of Rights and Freedoms*, have raised the profile of children's issues.

In Ontario, the government attempted to strike a balance between children's rights and the principle of "the best interests of the child" in the 1984 *Child and Family Services Act (CFSA)*. The elevation of the rights of procedure over the rights of substance, however, was an unintended outcome of the new *CFSA* which extended procedural rights to children. Concern has arisen particularly among service providers who deliver services governed by the *CFSA* that the extension of procedural rights and other procedural restrictions governing the activities of children's services agencies has had the effect of impeding agencies' ability to protect children from themselves and others.

Many argue that the needs of children, particularly those who are most vulnerable, are not being addressed adequately or in the most appropriate way when new regulations under the *CFSA* result in undue delays in providing protection to children. Some critics claim that the review process is too cumbersome and that strict adherence to regulations – such as the requirement that a Children's Aid Society

obtain a warrant to apprehend a child in need of protection – can sometimes be detrimental to a child’s well-being.

The conflict that is generated through debates about the respective rights of individual players has divided those who should ideally join together to ensure that children enjoy healthy development. Parents are set against service providers, while the needs and voices of children are obscured in adversarial negotiations.

We maintain that the exclusive discussion of children’s rights *per se*, particularly the rights of procedure, has precluded its fundamental counterpart: the discussion of the responsibilities that all of society shares to provide for children’s needs. Therefore, we adopted the concept of entitlements because it encompasses, first, the rights of substance and of procedure and second, the sense that there is a collective social responsibility to ensure that these rights are upheld. The idea of reciprocity or social contract figures prominently in our thinking about a transformed network of supports and services for children who have little or no control over their immediate circumstances.

This expanded notion of rights and responsibilities, captured in the concept of entitlements, has been critical in our deliberations on how best to improve the conditions that produce such risks for children. By placing the needs of children in the forefront, we redirect attention towards the relationships among those who care for children. Rather than dividing public from private, parent from service provider, and the child from all others, the Committee believes that we must work towards new partnerships to support children and their families more effectively in a changing environment.

Conclusion

Chapter 4 looks more closely at the current service system and the specific problems that have developed over the relatively short history of government and private sector support for families raising children. Taking as our standard the **Statement of Entitlements** in this chapter, we evaluated the current systems of supports and services for children and their families and developed broad goals to guide the transformation of these systems.

1. See M. Rutter and N. Garmezy, *Stress, Coping and Development in Children* (New York: McGraw-Hill, 1983).



Chapter 4 The Current Service Systems

Introduction



The Committee was charged with the task of making recommendations about directions for children's services for the coming decade, with emphasis on the range of specialized services funded by the Ministry of Community and Social Services (MCSS). This chapter examines the history of the current specialized services for children and assesses their ability to meet children's needs. In order to address the entitlements of children, we have set four major goals for a public response.

A Historical Perspective

The concept of a service "system", in the sense of a network of government-supported programs and services for children, is a relatively new one. The experiences of the Depression and of the Second World War were largely responsible for the evolution of our current concept of a "safety net" of social services, which could "catch" people whose lives took an unfortunate turn for the worse and help them to get back on their feet.

The 1950's and 1960's were times of steady economic growth and an expanding tax base. This led to the expansion of a range of services for children and families (such as an increase in boarding homes from 16 in 1958 to 169 in 1980) and the creation of whole new services (particularly children's mental health centres which were created as a sector in 1969).

The result of these postwar trends was the evolution of a system of services that grew ever more complex and specialized. Ours is not the first attempt to simplify and rationalize the maze of services that constitute our safety net for children. A government review of specialized services for children published in 1980 entitled *Children's Services: Past, Present and Future* indicated clearly that this system was plagued by inconsistencies, over-specialization, and fragmentation. This review identified a number of areas of concern, such as:

- the fragmented nature of the children's service system which resulted in children, particularly those most difficult to serve, being bounced around from agency to agency;
- agencies with diverse, vague, and often overlapping mandates for service;
- the lack of an overall planning forum for children's services as a whole, which led to such problems as regional disparities in the availability of services and an inability to identify and fill gaps in service.

In an attempt to reduce this fragmentation of responsibility for services for children and thereby rationalize services, the provincial

government created the Children's Services Division within the Ministry of Community and Social Services in 1977. The goal of creating this division was "to bring together all programs for children with special needs into one organizational unit within the provincial government ... [so that] for the first time the services for this group could be brought into focus and dealt with as a whole.¹

At the same time as a single central organization was being developed, the province was also exploring models of increased local authority. It experimented at the community level with developmental projects known as Children's Services Committees. These were intended to coordinate and allocate resources to children's services at the local level and "to ensure the provision of an equivalent focal point at the community level, to increase the responsiveness of children's services to the local community and to increase involvement of the community in the provision of service."² However, in 1982, before the development of Children's Services Committees was complete, the experiment was terminated. The Ministry of Community and Social Services decentralized into what are now four regional and 13 area offices. These offices then took on the responsibility for managing the service system for children, in addition to their other responsibilities.

To support the organizational consolidation of specialized services for children, the government passed the *Child and Family Services Act (CFSA)* in 1984. The *CFSA* was intended to initiate a new era in services to children and families. The Act consolidated several pieces of separate legislation and introduced new service categories that were to provide a new and more flexible focus for service management. The service categories under the *CFSA* are child development, child treatment, child and family intervention, child welfare, community support, and young offenders' programs.

The *CFSA* was a landmark piece of legislation for children, but current provisions fall far short of that vision in many ways. For example, there are major inconsistencies between the *CFSA* and other legislation that concerns children and families, such as the *Mental Health Act* and the *Education Act*. These issues are discussed in Chapter 7. There have also been problems in implementing some of the goals of the *CFSA*.

The most recent attempt to rationalize specialized services took the form of a policy consultation document, *Investing in Children*. This document proposed the establishment of formal agreements and links among service providers to coordinate service provision and discussed the targeting of resources towards the prevention of disorder and the care of those with the most severe disorders.

The Current System of Specialized Services for Children

Despite the best intentions and efforts to promote integration, presentations made to the Committee indicated that serious problems still exist in service delivery and boundaries continue to divide service sectors. All too often children continue to be referred from agency to agency or service to service, based on their “label” (such as “young offender” or “emotionally disturbed”). Responsibility for children’s services is still diffused, and the system lacks coordination. The following section examines the current functioning of the specialized services and the pressures they face.

In our examination of specialized services funded by the Ministry of Community and Social Services, we focused specifically on child welfare services, child treatment, child and family intervention services, and YOA services. The Committee saw much evidence that our traditional safety net of services is under stress, as the current structures and modes of functioning fail to adequately address changing social realities.

1. Child Welfare System

The child welfare system is responsible for the protection of children. The Association of Children’s Aid Societies reports that as of June 30, 1989, there were just over 10,000 children in institutional and residential care within the child welfare system.³ This figure represents a drop in total numbers over the past 25 years, because of increased emphasis on keeping children in their homes and avoiding out-of-home placements unless absolutely necessary. Some of the trends, however, in the pattern of children in care are troublesome.

In presentations made to the Committee, those who work within the child welfare system said they believe those in need of services are more troubled now than those who requested services ten years ago. Certainly, there is an increasing awareness of the mental health needs of children within the child welfare system. This translates into increasing difficulty for the service providers in finding appropriate residential and foster placements for these troubled children and youth; the children also encounter more stress, as they are often placed in less than adequate settings or far from their families, schools and communities. These children also require increased treatment and intervention, which taxes available resources within the child welfare system, because the appropriate resources are often not readily available from other specialized service providers within the child treatment system.

As service providers within the child welfare field compile statistics

and research on their client populations, they are becoming more able to identify the risk factors that increase the likelihood that children will require protection. Social disadvantage is clearly a risk factor. Children and youth from backgrounds of poverty are overrepresented within the child welfare system. A disproportionate number of children of sole-support mothers and children of teenage parents come into care. In fact, a study of Children's Aid Societies in southwestern Ontario found that 85 per cent of the caseload originated from parents who had had children while in their teens.⁴ Native children and other visible-minority children are also overrepresented among children in care. Six per cent of all native children are in care, compared with only one per cent of the total child population in Canada.⁵

As these trends become apparent, child welfare service providers strive to increase their preventive and supportive efforts with socially disadvantaged populations in an attempt to reduce both the incidence of abuse and the need for out-of-home placement. Difficulties arise because the structure of the service system has not itself been modified. A system-wide effort to address the precipitating factors of abuse would be more valuable than a case-by-case approach to protection once abuse has occurred. For example, while these increased services support the maintenance of children within their families and have been instrumental in reducing the number of children in residential placements, current funding practices actually operate as disincentives to such "front-end" services.



2. Child Treatment and Child and Family Intervention Services

Ontario has a large service delivery system concerned with the mental health of children. Over a hundred agencies across the province provide a range of mental health treatment and child and family interventions, from outreach and prevention programs to day treatment and residential services. The focus of these services is on children with behavioural, social, and emotional problems.

Mental health service providers reported to the Committee that their existing services are overtaxed, and that long waiting lists for service inhibit their capacity to provide service to those requesting it. Moreover, services often fail to reach our most marginalized and disadvantaged children who have substantial need for intervention. This has led government and other service providers to challenge the treatment and intervention system to increase their outreach capacity. Furthermore, the inability of this system to keep up with current specific demands means there is little time available to engage in more proactive efforts.

At the same time as we were confronted with the demands on this system, we examined the recent epidemiological survey, the *Ontario Child Health Study (OCHS)*⁶, which found that a considerable proportion of Ontario's children exhibit behavioural, social, and emotional problems. About 18 per cent of Ontario's children between the ages of four and 16 exhibit significant levels of behavioural and emotional disorder. These levels seem high, but they are consistent with those found by other epidemiological studies in other countries. These levels of disorder were considered high enough to lead us to conclude that many children would require some type of mental health intervention if they are to achieve our goal of healthy development and well-being. Yet when the same researchers examined the service utilization rates of these children, they found that fewer than one out of six children with disorders were receiving any kind of specialized help.

Continued demands for service that are greater than the system's capacity to respond using current methods of service delivery, coupled with the prevalence of disorder, demand a new approach to service provision. The challenge to the system is to develop new ways to meet the mental health needs of children and to target more effectively the use of the limited resource of trained professionals within the system to meet the needs of children with serious difficulties.

3. The Young Offender System

In 1988-89, according to figures from the Ontario Ministry of the Attorney General, over 24,000 youth between the ages of 12 and 15 and 25,000 youth aged 16 and 17 were charged with one or more offences.⁷ Services for young offenders differ from the services described above, in that most are operated directly by the provincial government. Services include supervision, custody, diversion and treatment.

The 1984 federal *Young Offenders Act (YOA)* set a new legislative framework for young people under 18 years of age. Under previous legislation, youth aged 16 and 17 came under the jurisdiction of adult court. One of the major changes of the *YOA* was the transfer of these young people to the young offender system. In Ontario, services for children aged 12 to 15 are provided by the Ministry of Community and Social Services, and services for 16- and 17-year-olds are provided by the Ministry of Correctional Services. Presentations made to the Committee suggest that this split jurisdiction gives rise to inequitable dispositions and general confusion.

The new law has been criticized from the law enforcement perspective as being too lenient on youth who commit violent crimes

such as murder. The provincial and territorial Attorneys General proposed amendments in 1989 that emphasize protection of society through longer sentences and easier transfers to adult court. On the other hand, the YOA has come under fire from the social welfare perspective as being oriented too much towards punishment, rather than towards rehabilitation or treatment of young offenders.

More generally, some critics argue that justice is not applied equally across social groups. They contend that children from poor and native families are more likely to end up in court, while middle-class children are more likely to be diverted into mental health treatment programs.

Presentations made to the Committee indicated a system that is overloaded, and within which the mental health needs of the youth are not well met. The courts are crowded with a backlog of cases, and the treatment services that now exist for young offenders are overloaded. In addition, treatment services are not readily available for the older offenders, those between 16 and 17 years of age.

Many of these youth have serious behavioural and emotional problems; their appearance in the juvenile justice system instead of the treatment system is almost a matter of chance. Yet once they are in this system, the youth are labelled “young offenders” and this makes it even less likely that they will get the intervention they need in the future. Concerns were expressed to the committee that the YOA has not adequately improved the juvenile justice system, and that the system continues to provide ineffective responses to troubled youth.⁸

4. Summary

In reviewing the stresses on the current specialized services, we heard common problems echoed by the presenters from the different service sectors. All systems are working over capacity with limited resources. The severity of the problems and the treatment needs of the children are significant. As a result, service providers are frustrated. They feel unable to make significant progress using case-by-case approaches to service, yet they have limited capacity to organize a more systemic response incorporating prevention and early intervention.

Children and Human Services: The Broader Context

Much of our work has concentrated on specialized services, but we ultimately found this focus too narrow to address the changing realities and the range of entitlements outlined in the previous chapters. We therefore also directed our attention to the broader range of supports and services provided for children. We are convinced that one of the major reasons why specialized children's services are under such stress is that they are working in relative isolation, not only from one another but also from the broader range of services for children. There have been too many barriers to collaborative efforts with the wider human service system to promote children's well-being and prevent problems in child development and family relationships.

Our focus on improving children's life chances through the promotion of well-being and healthy development necessarily led us to review the roles of other human services. Education, health, recreation, and other service providers, whose work regularly affects children, are integral to any effort directed to the promotion of children's well-being. These mainstream systems represent a significant resource for helping children and families. We feel they should be included in the mandate of providing a response system to care for children.

1. Education

There are close to two million children and youth enrolled in elementary and secondary schools across Ontario. Over 100,000 full-time teachers work in those schools. The public has a major investment in schools and in education; provincial and local expenditures on elementary and secondary education in 1989 amounted to about \$9.7 billion.⁹ Over the past decade, schools have integrated a large number of children with special needs into their mainstream programs. The education system presents a tremendous resource as we consider ways to organize a response to the entitlements of children.

2. Health

Health services constitute another human service system that is regularly involved with children and families. Ontario now spends \$15 billion on health care, of which a substantial portion is spent on the health needs of children. The health system can be an important outreach tool for supporting healthy child development. Doctors are often the first professionals to come in contact with young children, and their advice may be sought first by parents throughout the child's development.



Within the health care system in Ontario is the public health system – those services provided by public health units. The Ministry of Health has established four major public health goals: promoting healthy growth and development, promoting healthy lifestyles, controlling communicable disease, and protecting healthy environments.¹⁰ All these directly affect children and their chances of growing up physically and emotionally well. The level of public health services varies across the province, as does the emphasis on child-related issues.

3. Recreation

Recreational services are another area where children are involved daily, and yet they are often a forgotten partner in efforts to ensure their well-being. The Ministry of Tourism and Recreation estimates that \$7.3 billion, or \$2,300 per family, is spent on recreation in Ontario annually.”¹¹ Children benefit from the stimulation of being challenged by physical and creative recreational activities.

However, Ontario’s current recreational system tends to be oriented to middle-income families. There are some innovative programs for low-income families, but in the main, the recreational system is not geared to disadvantaged children. Also, the system has not adapted well to new family realities – many programs presuppose that a parent is available during the day to chauffeur children to programs outside the neighbourhood, when both parents are usually at work.

4. Child Care

This service area is struggling to meet the rising demand caused by the changing nature of families and the economy. At present, child care is in short supply. According to the MCSS document *New Directions in Child Care*¹², about 100,000 children in Ontario are currently enrolled in licensed child care programs, full-time or part-time. It is estimated that these are only 20 per cent of the children whose parents work; the other 80 per cent of these children are left in private, informal child care arrangements, or they swell the ranks of the “latch-key” children who come home alone to empty houses after school each day. For many families child care is also a serious economic burden. Subsidies for child care are available to some low-income parents, and there are currently 44,000 children in subsidized child care across the province.¹³

Child care services, and especially subsidized child care spaces, are unevenly distributed across Ontario and do not serve a range of needs equally well. Child care advocates note that programs are difficult to obtain in rural areas; shift workers have problems finding child care

available during their working hours; child care that is available for family emergencies is scarce; services for infants are particularly lacking since many child care providers set minimum age levels.¹⁴

The province has already stated its goal in this area – to change the direction of child care “from its present welfare connotation toward that of a basic public service” that is accessible to all families who require it. The challenge in the coming years is to meet the demand for high-quality child care services that are flexible enough to meet the wide range of needs of families, and to do so in an economically viable manner.

Conclusion

It is our conclusion, after reviewing the materials made available to us through presentations and research, that the existing systems are not currently addressing children’s entitlements in a satisfactory manner. In examining the existing systems, we were forced to address serious problems within them. Services are too fragmented, over-specialized and overburdened. They have limited outreach capacity and are working in isolation from one another. Consequently they are unable to provide an adequate public response to children’s needs.

At the same time as we have identified the inability of the existing systems to address adequately the entitlements of children, we find ourselves in a climate of economic restraint, where we must learn to maximize the effectiveness of limited resources. Any new proposals for organizing a more appropriate service response for children cannot make undue demands on the public purse. However, Ontario has already made a strong commitment to services for children and has a substantial investment in the children’s services network.

The provincial government is now spending about \$1.4 billion a year overall within MCSS on children’s services, including child care.¹⁵ Over the decade 1978-79 to 1988-89, spending on specialized children’s services increased from \$245 million to over \$800 million, including an average increase of 13 per cent per year.¹⁶ (This figure does not include spending on developmental or support services for children and their families, which are not included in the children’s service program budget). In addition to MCSS spending, there are substantial expenditures in family and children’s services across Ontario by municipal governments and the voluntary sector.

If we add to these figures the billions in public expenditures on health care, education, and recreation that are directed towards children, what emerges is a substantial resource pool, which, if used flexibly and creatively, can produce significant improvements in the system of supports and services for children. What is required for

Addressing the Entitlements of Children

substantive change is a comprehensive approach that takes into account the whole resource pool for helping children and families, across ministerial jurisdictions. Additional resources may be needed, but this cannot be determined until current resources are more effectively deployed.

Throughout our deliberations we have focused on ways to improve the life chances of children. The costs of providing the necessary supports and services that children need are far outweighed by the wasted potential in adulthood and the perpetuation of problems from generation to generation. Healthier children have brighter prospects for fulfilling lives and are more likely to contribute successfully to the general prosperity of our society. Raising healthier children will ultimately reduce the current pressures on the specialized service systems.

Without some new impetus for change, the systems of care and support for children and their families will continue to be inadequate to the challenges facing them. We are concerned that not only do the services fall short of meeting the needs of children today, they will also become increasingly out of step with the challenges of the future. During the eighties, attempts were made to adapt service responses to changing realities. However, many of these changes involved making modifications and adjustments to existing fragmented services in isolation one from another. We believe that the systems that support children and their families must be considered together and transformed in order to enable them to promote children's well-being.

The Committee proposes the following major goals for the transformation of the network of supports and services for children. It is our belief that these goals can lead to actions that will enable our province to promote more effectively the healthy development and well-being of children.

Statement of Goals

Goal 1: Promoting the well-being of children and defending their entitlements must become society's highest priority.

Goal 2: An equitable economic base must be created that enables families and communities to provide for the entitlements of children.

Goal 3: Laws that affect children directly or indirectly must be written or amended to express and give force to their entitlements.

Goal 4: Government must become the leading partner in creating a public agenda for children and in establishing an integrated framework that ensures that the entitlements of children are met through a holistic system of supports and services.

In the following chapters we will discuss each of the goals listed above and describe how each goal leads to a rethinking of our public response to the entitlements of children.

1. Ontario Ministry of Community and Social Services, *Children's Services: Past, Present and Future* (Toronto: Queen's Printer for Ontario, 1980), p. 21.
2. *Ibid.*
3. Ontario Association of Children's Aid Societies, *Information for Service Planning 1989*, Fact Sheet No. 4, Toronto, 1989.
4. London Family and Children Services Survey of Family Formation and Marital Status of Client Families, 1986.
5. Denise Avard and Louise Hanvey, *The Health of Canada's Children* (Ottawa: Canadian Institute of Child Health, 1989), p. 114.
6. Ontario Child Health Study, *Summary of Initial Findings* (Toronto: Queen's Printer for Ontario, 1986).
7. Statistics Canada, *Canadian Crime Statistics 1988*, Ottawa 1989, Table 2-19.
8. Marge Reitsma-Street, "Implementation of the Young Offenders Act: Five Years Later", paper presented to the Fourth Annual Social Welfare Policy Conference, Toronto, October 1989.
9. Ontario Ministry of Education data, including *School Board Estimates*, 1989.
10. Ontario Ministry of Health, *Mandatory Health Programs and Services Guidelines* (Toronto: Queen's Printer for Ontario, 1989).
11. Ontario Ministry of Tourism and Recreation, *A Community Recreation Policy Statement* (Toronto: Queen's Printer for Ontario, 1987), p. 11.
12. Ontario Ministry of Community and Social Services, *New Directions in Child Care* (Toronto: Queen's Printer for Ontario, 1987), p. 1.
13. *Ibid.*, p. 6.
14. *Ibid.*, p. 11-13.
15. Ontario Ministry of Community and Social Services, *Program and Resource Summary, 1989-90 Estimates*, 1990.
16. Ontario Ministry of Treasury and Economics, *Ontario Budget 1989*, Budget Paper D, Expenditure Profile of Ministry of Community and Social Services, p. 76.



Chapter 5

Promoting Well-Being and Healthy Development

Goal 1: Promoting the well-being of children and defending their entitlements must become society's highest priority.

Introduction



In this chapter we discuss the implications of adopting a promotional approach for the organization of services and supports for children. We present recommendations for transforming services and enhancing the partnerships among them. We also examine the specific comprehensive service responses required at each developmental stage to support the entitlements of children.

The concept of promotion of well-being has been central to our deliberations. While treatment and rehabilitation efforts must remain important parts of our attempts to care for our children, we believe that children's basic entitlements can only be met if there is also a commitment to set in place mechanisms and processes that support the promotion of increased physical, mental and social well-being for children.

Universal promotion of healthy development and well-being for children is not part of the current safety net of services. The safety net emphasizes the identification and remediation of problems in children already experiencing difficulties, disorders or disabilities. A system that encompasses promotion as well as treatment and rehabilitation must provide a continuum of supports – emphasizing the promotion of well-being, the prevention of social, emotional, and behavioural problems, the earliest possible intervention once problems emerge and protection from harm. We envision a system of interconnected and mutually supportive services working together to promote healthy child development.

Within a system that promotes the well-being of all children, it should become easier to identify the special needs of those children who are experiencing problems and to rally resources to address their needs. We recognize that children will require varying levels of intensity of effort to ensure that their entitlements are adequately addressed, as families will require varying degrees of support to enable them to meet their children's needs. We are also aware that it is often the most needy who are least likely to use services. Our service system must have the flexibility to provide the level of intensity and the range of services required by a child and family, and must be able to reach out in a non-stigmatizing manner to the neediest and most marginalized children in our province. The challenge is a daunting one. The solutions must be broad-based, must cut across traditional

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professional and jurisdictional boundaries, and must keep the needs of the child at the centre of the planning process.

We realize that to meet the entitlements of children we must change public attitudes about our shared responsibility towards children and the value of actively promoting healthy development. To accomplish this aim, we must inform the public about the stresses on children and their families, the disturbing trends in problems affecting children, and the inability of our current service systems to meet adequately the comprehensive needs of children. This information can provide a compelling argument for adopting a promotion focus.

In addition, we must encourage the active participation of community members in promoting healthy development. Public education about children's entitlements to the conditions that support healthy development, and the responsibility of every adult to defend these entitlements, is a critical element of our endeavour.

Recommendation:

The provincial government should engage in a campaign, of the magnitude of Participaction, to increase public awareness and support for promoting the entitlements of children.

The problem is not merely one of dissemination of information. There must also be a strong research commitment, supported by adequate funding, to increase our knowledge base about factors that promote well-being and factors that place children at risk.

If this ongoing educative process is to remain vital, we believe, responsibility for increasing our knowledge base and disseminating the information must have a specific administrative locus. Chapter 8, which describes structures to support the implementation of our goals, discusses administrative entities that could be charged with such an undertaking.

A Service Response to Children's Entitlements

In defining a service system that addresses the entitlements of children, we examined the potential of universal, mainstream services as the focal point for organizing a service response to many of the entitlements of children. As discussed in Chapter 4, service systems such as the education system, the medical system, public health, and child care services have tremendous untapped potential as resources in the promotion of children's healthy development and well-being. Only a very small percentage of the province's children come in contact with the current safety net of services, and most are already experiencing distress or disturbance by the time they reach child welfare, young offender services, or child intervention and treatment services.

Most children attend the public and separate school systems; many have contact with the health system through routine visits to family physicians, emergency and routine hospital care, and the visits of public health nurses; and a number are enrolled in the formal child care system. If mainstream services are to play a more central role, their promotion and outreach capacity must be increased, through enhanced training and staffing. Specialized services should work directly with these mainstream services, establishing formalized connections for the delivery of supports and services.

Recommendation:

Mainstream services, including schools, public health units, recreation services and child care, should become the pivotal point for organizing a service response to the entitlements of children. Specialized services must organize their activities in relation to these mainstream services, through formalized linkages.

This changed relationship between mainstream and specialized service providers is necessary because we believe that children must be supported within their natural settings of home and school. The new working relationship will require the development of a new set of intervention and consultation skills. Service providers must develop new ways of providing necessary services to children within these settings. Through an expanded consultation role, it will be possible to enhance the effective range of our limited resource of trained specialized service providers, such as individuals providing mental health treatment, family therapy, and crisis intervention.

Recommendation:

Children should be maintained within their natural environments of home, school, and community, to the greatest degree possible. This will require that the specialized services commit resources for crisis intervention, and that new skills and strategies be developed and implemented to support children in their normal settings.

If specialized service providers are to be adequate partners in this relationship, we believe that they must undertake considerable preliminary work to rationalize their services, in order that they may forge strong relationships with mainstream service providers. At present the overlapping mandates, discontinuous age criteria, and other significant barriers outlined in an earlier section of this paper interfere with the development of strong links among service providers, and impede the provision of accessible, comprehensive services.

Recommendation:

The Ministry of Community and Social Services must rationalize its fragmented system of services at the same time as it builds links with mainstream service providers.

Increased integration of specialized services is necessary to improve their effectiveness and efficiency. Additional benefits of a more integrated specialized service system are, first, that it could be more generic in its delivery of service, thereby reducing the stigma currently attached to being “in the welfare system” for example; and, second, that it would simplify access and reduce the bewildering maze of entry points that now confuse potential consumers of the services.

As we heard presenters describing the mental health characteristics and problems of children and youth in their particular services, we found the similarities more striking than the differences. It often appeared a matter of chance or life circumstance that determined which service sector became involved with an individual child. In fact, many children simultaneously or sequentially receive services from more than one of the specialized service providers.

Since these services work in relative isolation from one another, overlap can result in an inefficient use of resources, with duplication of efforts on behalf of individual children, duplication of assessment procedures, duplication of staff training and skills across agencies, and even contradictory interventions. We believe that, in light of these realities, it is not possible to justify the continuation of our current segmented and isolated system, which addresses the needs of children as a series of serviceable parts. Children must be responded to in a holistic fashion, as complex entities who must be considered within the context of home, school, community, and society.

Recommendation:

The provincial government should promote models of service integration and collaboration that simplify access to service and rationalize the roles of our limited resource of trained specialized service providers.

We believe that any efforts to promote healthy development must be broad-based and ongoing, must be delivered in an equitable and non-stigmatizing fashion, and must allow ready access for the greatest possible number of children. In considering these prerequisites for a delivery system that could promote child well-being, we were drawn repeatedly to considering the school as a major focal point for coordinating a service response to children’s entitlements.

Most children spend a considerable portion of their waking hours and of their developmental years in school. Clearly, the school must be seen as a key participant in any system of supports and services for children. The central role of schools as a focal point for promotion efforts has far-reaching implications for the way in which schools currently operate, the way in which other service providers interact with schools, and the way in which we think about the use of the physical plant (that is, the school building).

There are two reasons why we see the school as having a key role in our rethinking of a broad system of services for children. First, the school is a key environment for imparting social values, promoting a sense of self-worth, and teaching a range of relationship and coping skills, in addition to the broad range of academic skills required to prepare children for full adult membership in society. We therefore believe that it is in the best interest of children to maintain them within their school wherever possible. The system must minimize the disruption that comes from removing children from their classrooms or schools as a result of disruptive behaviours, exceptional needs, or required interventions from Young Offender, child welfare, or treatment services. At present, resources for the difficult-to-serve child or the exceptional child are more likely to be made available on a remedial basis once an individual has left the mainstream service. To enable the school to accomplish its significant tasks, teachers must receive the required resources to enable them to maintain the child within the classroom.



A second reason why schools are important to our proposals is that they are a major physical resource available within almost every community. They are the primary locations where children congregate outside of home, so they provide an excellent focal point around which to organize a system of supports for children and their families.

One model for enlarging the role of the school as a hub of a system of supports for the promotion of children's well-being is that of the community school, which is already operating in various settings across the province. The community school concept is not a new one; it became popular in the 1960's and early 1970's. Those who promote the community school concept propose that the school should be the focus for community development, and that the specific design of the community programs should evolve through citizen participation to meet the needs of the particular community's children and adults.

Vital community schools have a host of activities and programs for children and adults, on-site child care centres, family resource centres, before- and after-school programs, summer programs for school-aged

children, and seniors' programs. Several model programs exist across the province and can inform any large-scale undertaking in this area. Unfortunately, this concept has never been adopted on a system-wide or province-wide basis. The concept is also too often viewed as merely a matter of keeping the lights burning in the school buildings after hours so that community members can use the gym. However, in its most comprehensive form, it represents a hopeful direction for organizing a service response for children.

Dr. Edward Zigler, at Yale University, has developed the "school of the 21st century".¹ He proposes that the school be viewed as a physical resource available within almost every neighbourhood, around which a full range of supports and services for children and their families can be organized. The school becomes the hub for all early childhood services. This model includes a child care centre; outreach programs providing support to parents, infants and toddlers; parent training for expectant parents; information and referral services; support to private child care in the neighbourhood; and family resource centres. Zigler began this work as an examination of the need to expand and increase the accessibility of child care in the United States, but in so doing, he quickly realized the tremendous potential of schools. These non-academic functions are performed not by the school personnel but by other service providers and volunteers.

Many of these concepts are congruent with the directions being taken in our province. In Ontario, one-third of all child care centres are already based in schools, and within the child care system, we have over 200 parent resource centres which perform promotional, information, and linking functions such as those discussed above. Closer examination of these existing services can help in the development of models of service delivery organized around the school that would be appropriate to our province.

In reviewing the successes of the community school model and the school-as-a-hub model, we concluded that these concepts hold great promise for promoting children's well-being and healthy development. We believe that they should be studied carefully to determine whether adaptations from these models could become the building blocks for a new model of delivering supports and services to children and their families in Ontario's communities. Where such models are being implemented in parts of the province, these efforts should be carefully documented and evaluated in order to steer further development and expansion.

Our basic intent is that each neighbourhood or community should have a physical centre that can be the hub of child-related services,

bringing together a wide range of service providers within one natural community setting. We realize that in some communities the school may not be the most appropriate centre for services, and there may be other logical hubs. It is for this reason that individual communities must play a key role in adapting this concept for their own neighbourhoods.

Recommendation:

There must be a single major physical centre that operates as a hub of services for children within each community. Where possible, the school should be this centre for service provision.

Families are the cornerstone of any vision of promoting well-being and healthy development in children. Children require the stable care and nurturing best provided by their families, and families must be supported in this task. They must have access to services when they are needed, and such services must be delivered in a way that respects the needs and conditions of the families. Supporting families also requires the combined efforts of government and private enterprise, so that parents are able to balance their work and child-rearing responsibilities.

We must create a specialized service system within which access to services is simplified and destigmatized. At present families must negotiate their way through a complex maze of service providers to find the most appropriate service for their child. Because service capacity is taxed, many families place themselves on multiple waiting lists, often undergoing repetitious assessments in the process, and finally accepting service from the first place that has an opening. Others give up their search for help in the face of this complexity, while still more families never approach service providers because they are made uncomfortable by the stigma associated with seeking specialized services.

Clearly, children are not served well by such a complex and disorganized system. We believe that the province should promote one-stop access to services and that the point of access for families should be relatively stigma-free. Linking specialized and mainstream services at a community level and adopting a promotional focus for all services should be instrumental in reducing the stigma attached to services. Integrating service delivery and organizing service responses around the school at the community level, as discussed earlier, would accomplish this aim; within such a structure it would be feasible to create one body that would coordinate assessment and service delivery.

The other issues related to access for families concern hours and flexibility of service. At present most services are offered during normal working hours and require the family to come to an office at an agency. Some require that all family members, including extended-family members, attend intervention sessions. These practices are inappropriate in light of the changing family realities discussed in Chapter 2. They place undue hardship on families as they struggle to meet the competing demands of the service providers and their work lives, and in many cases they deter families from receiving the services they need. Service providers must adapt to the changes in the family and organize their service response to meet the needs of the family. Evening and weekend hours of service, home visits, and more flexible criteria about who attends individual sessions are required to enable the specialized system to support the family in its child-rearing tasks.

Recommendation:

Accessibility of specialized services must be improved through the development of single entry points within communities that can coordinate assessment and service delivery. Accessibility must also be improved by increased flexibility in hours of service and methods of service delivery.

One of the most significant supports required by families is accessible, affordable, and high-quality child care. This is necessary to allow families to balance their economic and care-giving responsibilities. At present the number of child care spaces available is sorely inadequate and the quality of care provided is inconsistent. The consequent makeshift arrangements for caring for children are unacceptable. High-quality child care can be instrumental in promoting healthy child development. The specific child care requirements of our children at various stages in their development is detailed in a later section of this chapter.

Recommendation:

The provincial government should develop a comprehensive child care policy with a timetable for the broad-scale expansion of child care facilities, as well as other child care options for working parents and their children.

The solutions to the child care crisis must come from government leadership, but they must also come from the business community, which needs women in the workforce. Business must be encouraged, through incentives, to make a positive contribution to the balancing

of work and family responsibilities. In addition to expanding workplace childcare facilities, businesses should adopt family-sensitive work policies.

Recommendation:

Employers should accommodate the competing demands of workers with family responsibilities by easing the time strain of employment hours wherever possible, through the implementation of such options as part-time work or job sharing; flextime and working at home; and sick-child-care leave and personal family leave.

**When Problems
Emerge**



The Committee recognizes that even within a universal promotion framework, some children will still require more intensive help to achieve or sustain healthy development. It is our belief that within a system that is promotional, and that supports an integrated response to the needs of children, more intensive efforts can be more readily undertaken and are more likely to be successful. We believe that within the promotional framework which we propose, there must also be a strong focus on making high-quality specialized interventions available when they are needed.

Our capacity to develop and deliver prevention and early intervention efforts must be expanded. Our knowledge about the factors that place children at risk for serious emotional and behavioral problems has increased through research efforts in the past few decades. Our service systems must make use of this increased knowledge to target their resources effectively.

Prevention initiatives that are intensive and comprehensive should be targetted to those populations most at risk. To maximize their effectiveness, these services should encompass families and the community as well as the child. The *Better Beginnings, Better Futures*² project is a major interministerial undertaking – involving the Ministries of Health, Education, and Community and Social Services, as well as the federal Department of Indian and Northern Affairs – that can be a model for high-quality prevention programs. It will provide a great deal of information about preventive interventions for years to come. The project involves research into primary prevention of emotional and behavioural problems in children within economically disadvantaged communities. To qualify for funding from the project, communities had to demonstrate an integrated model of service planning and delivery and incorporate a major community development focus. This project has time limits and a restricted budget; we believe that an ongoing specifically funded program of incentives for prevention must be built into our system in order to ensure a permanent, province-wide focus.

The early identification of risk or disorder must be undertaken more systematically than it is currently, and must be supported by high-quality early intervention programs. To enable accurate targetting of early intervention programs, early intervention efforts must be based on increased knowledge about which of the problems that emerge in childhood and adolescence are likely to lead to long-term and far-reaching problems. We require more research linking these early problems to serious later difficulties and identifying intervention methods that can effectively alter the course of events. We urge MCSS to move forward on its stated intent to mount an early detection and intervention initiative similar to the *Better Beginnings, Better Futures* initiative. This approach was identified as a key strategy for improving life chances for children in the recent MCSS document *Investing in Children*.³

Recommendation:

An independent program of research and demonstration projects must be funded to provide information about early problems and later dysfunction as well as evaluative information about the success of intervention efforts. In conjunction with the development of a comprehensive data base, such research will permit the targeting of effective interventions for children.

Within a promotional framework it should be possible to identify problems as they emerge and intervene early, thereby changing the course of events and reducing the impact of the problem on other aspects of the child's life. Some of the problems of early childhood can give rise to a wide range of consequences as time passes. The cost to the individual and the family increases with the increased scope of the problem, with lost opportunities for healthy relationships and useful learning experiences, and the failure to acquire adaptive skills. As such disorders become more fully developed and more firmly entrenched in the individual, the disorder may become less amenable to treatment.

This is still fairly new territory for researchers and practitioners, but there are potential benefits to proceeding with this three-pronged approach to well-being – promoting healthy development, preventing the emergence of problems through intensified efforts, and modifying problems quickly when they do emerge, before they have had a disruptive effect on other areas of functioning, social relationships and learning opportunities.

We are also concerned about the disruption of the family that occurs when families are in crisis. Children are often brought into care when

Respect for Diversity

there are not enough resources that can be brought to bear to keep them at home. These efforts must, of necessity, weigh the safety of the child against the desirability of maintaining the integrity of the family unit. At present, service providers such as the child welfare agencies, although committed to keeping families intact, often do not have the funding flexibility to implement alternative strategies adequately.

We reviewed family preservation models of service delivery, such as Homebuilders, being developed in many parts of the United States. Some of these are demonstrating success at sustaining very troubled families' capacity to raise their children, through intensive, temporary interventions that are very different from routine interventions. A commitment to maintaining children within their families where possible will require a new way of intervening to support families through a crisis. Many of the present structures and funding mechanisms actually prevent or act as disincentives to providing service in a manner that supports the basic entitlements of children. For example, within the child welfare system, exceptional circumstance guidelines provide supplementary money for children in care or for investigations, but funds are not available for family support efforts to keep the child in the home.

Recommendation:

Child welfare agencies must have the funding flexibility to implement alternative strategies to residential placement.

Families can only be supported if our services are established in ways that are sensitive to their needs and that respect the rich diversity of this province's population. As described in Chapter 2, Ontario is a province with great cultural and regional diversity – fully 30 per cent of its residents claim a heritage other than English or French. Ontario receives half of the immigrant population coming to Canada each year, so this cultural diversity will continue to increase.

These cultural and linguistic factors present important challenges in organizing supports and services for our children and their families. Currently, our services are not equally accessible (or acceptable) to everyone. Certain ethnic groups, socio-economic groups and regional groups are underrepresented in some service systems (such as treatment services) and overrepresented in others (such as child welfare). With health promotion as our primary objective, we urge a strong commitment to reduce these inequities. We do not see a single solution to this issue, rather we propose that the solutions will come from increased community development and local planning, the development of more “user-friendly” services, and changes in the training of

service providers. The expansion of training for workers from minority cultural groups in the human services field is required, as is training of existing workers in an understanding of the values and goals of minority cultures so that services can be provided in a more culturally sensitive manner.

Local input should be sought about the mix and nature of services that best address the unique needs of community members. In this way, it will be possible to identify the barriers to service access within a particular community and institute plans to alleviate the problems. Service agency boards of directors and school boards should be encouraged to have a mix of members to reflect the variety of their community. Special efforts must also be made to reach out to new Canadians to engage them in this planning process.

Recommendation:

All service providers should work directly with community members to create accessible and responsive services that address the unique cultural, ethnic, racial, religious, linguistic, and regional diversity of Ontario's population. This will require greater representation of minority groups on agency boards of directors.

Ontario has the largest francophone population in Canada outside of Quebec; close to one million Ontarians speak French. In some communities in the province (northern and eastern sectors particularly) they represent an important segment of the population. There is an increasing demand for French-language services in these regions. The *French Language Services Act* supports the expansion of francophone services and places a responsibility on the provincial government to increase the availability of these services, particularly in those areas of Ontario where demand is high.

Recommendation:

The provincial government should provide resources for training and staffing to enable adequate implementation of the *French Language Services Act*.

Any framework for supports and services for children must also take into account the tremendous regional variations within this province. The needs and available resources of large urban communities, small towns and farming communities, one-industry towns, and the vast expanses of the north, where small communities are separated by hundreds of kilometers of non-traversable bush, require uniquely tailored service responses. These can only be developed by direct user involvement in the planning of services.

We have examined the special problems confronted by those trying to provide services in the North. This is an area where the provincial government has undertaken a substantial initiative in an attempt to rationalize and increase the accessibility. We support the governments efforts in the Northern Directions project, which appear to be making gains in establishing a viable integrated service delivery system for health and social services. Service providers and the government must also recognize the opportunity to support and enhance the natural helping networks that have developed out of isolation and necessity in many northern communities. Integrated and community-based models of service delivery present special problems and costs in isolated and northern communities. The high transportation costs involved in bringing together planning groups and service providers must be acknowledged, and the resources must be made available to cover these additional costs.

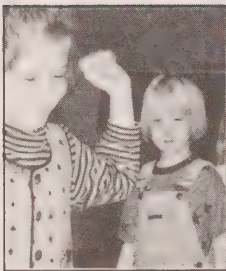
Recommendation:

Designated resources must be provided to promote natural helping networks and to train indigenous workers in isolated rural and northern communities in order to develop and support community models of service delivery.

The provincial government has a special trust and unique relationship with native people in this province. In considering the best ways to support healthy development within the native population, we recognize that any consideration of the service needs of native children must derive from the recognition of this relationship.

Clearly the needs of the native community are substantial. Every social indicator affirms that native people are the most disadvantaged population in this country. They are likely to experience a variety of health problems during infancy and are at great risk of early childhood death through illness or accidents related to impoverished socioeconomic environments. As native children mature, physical health problems decrease somewhat, only to be replaced by a variety of mental health problems. Exceptionally poor educational and employment opportunities, and a cross-generational susceptibility to various forms of substance abuse, combine with poor social conditions to make for teenage years where violence against both self and others all too often ends in conflict with the law, suicide, or “accidental” death.

Any transformation of systems that will affect natives must work to improve these basic social and economic opportunities and must incorporate the concept of community development. Community development is a particularly significant issue for native populations.



The problems experienced by native children and youth cannot be divorced from larger historical and structural processes that produce feelings of low self-esteem, both among individuals and among cultural groups. Native control over community development and over the delivery and management of their own services for their children will reinforce personal self-esteem and cultural identity. This may address the root cause of psychological and behavioural problems that native families and youth experience.

Recommendation:

Government and native communities should increase their common efforts to develop models of service delivery that are native-specific and that address the unique needs of native children. This will eventually involve transfer of management of children's services to local native organizations and agencies.

We believe that answers cannot be imposed on these problems. We recommend that processes and structures be put into place to increase the dialogue between native people and governments. Native people must also be supported in the determination of appropriate and culturally relevant supports and services. Working groups should be established to look for solutions to this problem. The relationships between native communities and the various levels of government also appear to impede creative solutions for native issues; the nature of the partnerships among the various stakeholders must be reviewed. For example, the federal-provincial cost-sharing of services for natives does not appear to support a health-promotional, preventive service response.

Recommendation:

The provincial government, in concert with the federal government, should develop processes and establish working groups to maximize the involvement of native people in the determination of policy, in research and in program planning.

Recommendation:

The federal-provincial cost-sharing for services for native children should be reviewed and modified to support the delivery of promotional and preventive services within native communities, provided by native organizations.

A Developmental Context For Promoting Well-Being

We have examined an integrated systems approach to promote the well-being and healthy development of children. In the following sections, we highlight the specific needs for service responses that are unique to particular age groups.

Child entitlements must be interpreted according to the changing needs of children as they grow. Efforts to support healthy development must be undertaken in ways that respect the changing developmental conditions and challenges of the child.

We concluded that some of the current difficulties in organizing an integrated service response to child entitlements are caused by poor links between age-specific service providers, which impede the flow from one developmental stage to the next. This problem seems to be exacerbated for certain age groups. We noted, in particular, the near absence of any coordinated support for families between birth and school entry and the convoluted and difficult transition from adolescent to adult services.

1. Preparenting

We began our deliberations from a promotion perspective, before the birth of the child, and considered how society can best set into play the basic prerequisites for putting life changes on the right track from the beginning. We considered the skills, the emotional supports, and the tangible resources that individuals require as they become parents to enable them to fulfil complex parenting tasks adequately.

We concluded that during this stage accessible community supports should be provided through public health units and physicians, school personnel, and parent resource centres in order to create an environment that is supportive of the parenting task for most individuals. We realized, however, that the large number of young adolescents who become parents are a significant challenge to our society and will require more comprehensive system responses. We were confronted with statistics that indicate that many children of adolescent parents are at risk for developing serious problems because they are less likely to have their basic entitlements met. Not only is the infant and later the child at risk in this situation, but the adolescent parent's life chances are also reduced.

As a society, we must address this problem in two ways simultaneously. First, we must make a concerted effort to reduce adolescent pregnancy, providing improved education about birth control through the shared activities of the public health and education systems. Second, when the adolescent does become a parent, we must provide

substantial resources to ensure that the young person has the best possible chance of being able to meet the child's entitlements through good prenatal care, high-quality maternity homes, and opportunities to learn good parenting skills. It is also important to enable adolescent parents to continue their own development by providing in-school day care, job counselling, and training.

Recommendation:

Substantial efforts must be undertaken through education and improved birth control to reduce adolescent pregnancy.

Recommendation:

The parenting capacity of adolescents must be enhanced through improved prenatal care, parent training, and adequate day care to allow the adolescent to pursue school or work options.

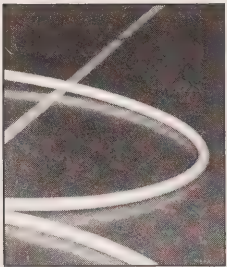
2. Prenatal Stage

We focused much of our attention on the prenatal and infant stages to ensure that children have the best possible start to a healthy life. It is possible to have a significant impact on the entitlements of children by providing high-quality prenatal care for all pregnant women.

The developing fetus requires adequate nutrition and freedom from damaging substances such as alcohol and drugs. Ensuring these basic entitlements requires an increased role for public health units and physicians, working collaboratively, in order to provide broadly based education about prenatal needs and outreach for those most at risk and least likely to get help. Good prenatal services and outreach should be expanded and made widely available, since they can have a significant effect on later life chances by reducing the incidence of low-birth-weight infants, physical and developmental disabilities, and infant drug-dependency.

Recommendation:

Prenatal services should be expanded and the outreach capacity of public health units should be enhanced to ensure that all pregnant women have access to high-quality prenatal care.



3. Infancy

Infancy is a critical period in child development, and yet we noted that it is a time when the child and the family are least visible to other members of society. After the first few days in hospital and for the next few years, there are few organized points of interaction between the family unit and any formal system, unless things go seriously awry. In many jurisdictions in Ontario, public health nurses no longer make a routine visit to new mothers and their infants. Thus, most families and their infants are isolated from public sources of support, and many lack even the informal supports of extended family and neighbourhood during this critical period of child development.

During this developmental stage, infants need warm, affectionate, responsive, and consistent care-giving. They also need protection from harm through constant supervision, routine medical care, and freedom from abuse. They require exposure to a stimulating, responsive environment. By guaranteeing that each child receives these entitlements, we can launch children on a successful path of healthy development.

Traditionally, the public health system has had a key role in ensuring infant well-being through early home visits, but the competing demands of an aging population requiring geriatric care, coupled with budget constraints, have reduced the universality of this service.

Still, we concluded that the public health system remains the most appropriate universal, mainstream, non-stigmatizing system that could take on the responsibility of organizing a promotional service response for the infant and the very young child. Enhanced service capacity, an outreach mandate, and support from other professionals, such as physicians, child development and mental health specialists, would be required to enable them to fulfil this key function.

We examined the model of well-baby clinics with routine check-ups that has been developed in France. Routine check-ups for prenatal and infant care are encouraged through financial incentives, which increase the likelihood that the services will be used by many who would otherwise be unlikely to seek such care. This system allows for regular contact with mother and infant. It enhances opportunities to promote conditions supporting healthy development; it facilitates the early detection of emergent problems; and it provides supports at a sensitive period of development for the child and for the family unit.

We recommend a system of well-baby services for families in Ontario. In the type of system which we envision, regular supports would be built in to ensure that children's entitlements are met. These services could be incorporated in the range of services available through the

We recommend a system of well-baby services for families in Ontario. In the type of system which we envision, regular supports would be built in to ensure that children's entitlements are met. These services could be incorporated in the range of services available through the school-as-a-hub model discussed in an earlier section, thus opening a long-term support system for parent and child. Such a system could include a self-help network for pregnant women and new mothers, which would increase opportunities for women to meet, interact, and receive necessary resources. Such services are one effective way to break the isolation of mother and infant. Education, support, and early detection of developmental or parent/child difficulties would be possible within such a model.



Recommendation:

The province should establish a province-wide network of well-baby services, which would include public health nurses with an expanded outreach and support role, family resource centres, and self-help networks. Incentives for using such services should be considered.

Recognizing that many parents are in the workforce at the time when their children are born, we also support the availability of a broad range of options for parents, to enable them to cope with caring for their children within the broader context of their lives. Options such as year-long parental leaves, shareable by both parents, should be seriously considered by government and employers as part of their partnership with children and families.

Quality infant care is expensive and rarely available at present. Options that enable parents to stay home with their infants may be the most cost-effective solution for infant care and may offer the best partnership role for supporting the development of early attachment relationships. However, for those who require it, high-quality day care must become more available.

Recommendation:

A range of child care options must be made available to parents during infancy, including extended (12 to 18 months) paid parental leave, shareable by both parents.

4. Preschool Years

Most parents of preschool children are working. Since young children continue to require constant supervision and consistent care during this stage, high-quality day care is the most critical service requirement for normal development.

The broad-scale expansion of child care facilities would bring preschool children out of isolation and provide increased opportunities for the system to support their entitlements. Any child care expansion must also ensure high-quality programming that not only provides supervision but enhances the physical, cognitive, and social development of the child. During the preschool period, young children have many new skills to learn. They are striving for mastery of their world, and require opportunities for learning and repeated practice of physical, cognitive and social skills in a supportive environment.

We support locating child care facilities within local school buildings, wherever possible. This would ensure access to the service for children and their parents and would promote closer links between child care and education staff. The current policy of locating child care centres in new schools is an important step in the right direction, but it should be expanded to include existing schools. Other community members can also make a contribution to meeting the need for more child care facilities. For example, groups planning new churches, apartment buildings, and seniors' homes should consider whether their facilities can provide child care spaces, examine the community need for such services, and discuss options with relevant service providers, as part of their planning prior to construction.

Recommendation:

Child care facilities should be located within communities, and within the local school building wherever possible.

Closer partnerships must be forged between educators and child care staff. This would allow for a smoother transition into the school years, because teachers would have a comprehensive picture of the child from an early age, and personnel can work together around half-day kindergarten and child care programming. Specialized workers should also be available to work with children within these programs to support early intervention initiatives that can begin at this stage. Speech and language disorders can be assessed early, and there are a number of existing early intervention programs focused on early developmental delays. Such initiatives would increase the likelihood that children enter school with a positive sense of self and a high probability of having successful academic experiences.

5. Early School Years

The 6- to 12-year-old child is a physically, cognitively, and socially more sophisticated individual than the preschooler. At this stage the child needs a wide and varied range of opportunities for learning and the development of skills.

Schools must adopt a comprehensive view of the child at this stage and emphasize the fourth “R” – relationships. To be effective schools require increased community and parental involvement in planning, more flexible time schedules, and a commitment to provide for the comprehensive needs of the child within the school wherever possible, in close collaboration with other service providers.

If the school is to assume a central role in the organization of a service response which promotes the well-being of children, it must become more accessible to the neighbourhood or community that it supports. This would entail changes in the operating structures of the school. Children should be supervised within the school building year-round and around the clock to accommodate the real needs of working parents. The school year should not be linked to an agrarian system, which is no longer the dominant organizing force of our work and family lives. This may entail some changes in actual school programming, such as sessional programs, extended school days, and full-day kindergarten programs. It may also require enhanced links with child care and recreation services to provide programming before and after the regular school day.

Recommendation:

The provincial government, in conjunction with local school boards and schools, and with other service providers, must institute year-round programming for children in their communities.

We also noted that this is the stage of development when children are most likely to come to the attention of the specialized services, as their treatment needs become apparent. The increased cognitive and social demands and the requirements of the school environment for routines and rule-following, as well as academic accomplishment, put new pressures on children. Sometimes these pressures highlight learning, behavioral and emotional problems. Treatment services should be available as needed and should be provided in partnership with the school and family. Closer links among teachers, specialized workers, children, and their families should also be used to improve the system’s capacity to identify problems early in the developmental sequence and to develop suitable responses.



Recommendation:

Service providers must increase their capacity for the early detection of emerging problems. High-quality intervention and treatment services should be available within the normal home and school settings as soon as problems are detected.

Many children also come to the attention of the child welfare system at this stage of development. Family violence, child abuse, and sexual abuse create damaged children in need of protection. We believe that if our recommendations are adopted, families would be under less stress, and this would result in a decrease in incidents of violence. Nevertheless, we realise that these problems will never be eradicated completely. When children's safety is jeopardized by such conditions, they are entitled to freedom from harm and to protection, and they have a right to help. Protection services must be accessible and able to respond quickly and with appropriate intensity to restore safety in a child's life. It is also our hope that in a society where there is a shared partnership among all the adults to address the entitlements of children, such incidents and the conditions which precipitate them will not go unnoticed. Timely intervention may enable us to cut short the pain and suffering that too many of our children currently experience.

Recommendation:

When a child's entitlement to freedom from harm is in jeopardy, protection services must be able to respond quickly and with appropriate intensity to restore safety for the child.

6. Adolescence and the Transitional Years

During adolescence, life skills are acquired, peer networks are developed, and steps are taken towards independence. Adolescents need support from adults and peers as they strive to adapt to rapid physical, emotional and cognitive changes. During the adolescent years, from 13 to 16, adolescents retain a significant need for supervision, support, guidance, and protection from harm as they try out more adult roles.

While we are able to identify markers that differentiate the previous age groups from one another, there is no clear boundary between adolescence and adulthood. The period that loosely spans the years from 16 to 25 is most often referred to as the transitional years. Most people agree that the 16-year-old youth is not yet ready for total

independence and self-reliance, and similarly most agree that young people are ready to assume full adult responsibilities by the time they are 25, although many do so much sooner. This period presents significant challenges to the way in which society organizes supports and services to ensure that entitlements are provided. The needs of youth must be addressed in a manner that acknowledges their near-adult status.

Families and schools have a critical support role to play throughout this period. We focused our attention during the adolescent years on the very large number of adolescents for whom the natural supports of home and school are either removed or given up. One-third of all adolescents drop out of high school, and runaways swell the numbers of the homeless in our urban centres, in disconcertingly large and increasing numbers. For many, the only system they come in contact with is the legal system. For these youngsters, the transition from child to adult is a difficult and lonely task.

Our primary objective during this stage is to increase the probability that adolescents can remain within their homes, communities, and schools, where they have the best opportunity to have their needs addressed. For many this will only be possible if adequate supports can be built around these natural settings. During this period the current service response to a problem is too often to remove young persons from their homes and schools. We strongly urge that alternatives to school expulsion, incarceration for criminal offenses, residential treatment placements, and other disruptive service responses be sought. Once breaks in the natural support networks are created, there is too great a likelihood that youth will not return to their homes, schools, or communities.

When natural systems break down despite all efforts to support them, we recommend the establishment of supportive housing options and financial support for continued education or work-related training opportunities. In addition, support and intervention services must be readily accessible and provided in a manner that is sensitive to adolescent concerns. They must respect the youth's right to confidentiality and provide service without parental involvement, if so requested.

Recommendation:

Service providers must utilize their resources for crisis intervention and family preservation strategies to enhance their ability to keep children within their families where possible.

We heard compelling evidence that current specialized services are not meeting the needs of adolescents and young adults. Split jurisdictional responsibilities, inconsistent age criteria for service eligibility, and varying consent formulations all conspire to create a maze of fragmented services that does not serve adolescents well. We are particularly concerned that the years from 16 to 18 seem to represent a “no man’s land” within the service delivery systems.

Issues of consent to treatment and intervention become more salient after age 16, as do the services’ ability to offer service directly to the young person without parental involvement. The child welfare system must be developed to enable it to help youth in their care to make the transition to adulthood. Within the young offenders system there is a dramatic change in the way young people are dealt with after they reach 16. Systems that serve children must strive for conformity of age criteria among themselves. At present, it is often difficult to provide service to youths from the time they reach about 15-1/2 until they are over 18, because of jurisdictional misalignments that allow them to slip through the cracks.

Legally, once a child is over 16, the school, the parents, and the child welfare system are no longer responsible for the developing individual. Many who addressed the Committee felt this arbitrary cut-off was a serious problem. For example, within the child welfare system, many of the young people who are wards may have experienced early deprivation, which hindered their growth and development. We concluded that the concept of readiness must be factored into determining how long our parental responsibilities should continue for young people.

Young people between 16 and 18 should be able to request and receive protection from child welfare agencies. This can be an age where safety is a serious issue, and yet there is no formal structure to support this basic entitlement during this period.

Recommendation:

Youths between the ages of 16 and 18 must have the right to request protection, and child welfare agencies must be mandated to respond.

Within our complex modern society the transition to adulthood is protracted and difficult. New partnerships to support this stage of development are necessary. For those who require specialized services such as treatment, better links and planning are required between the child and adult systems. If our recommendations are taken seriously, we believe that society may be able to increase the number of young people who successfully navigate this difficult transition and achieve healthy adult status.

Conclusion

In this chapter we have presented some of the initiatives that would be required to implement our commitment to a reformulated system of supports and services in which the prime objective is the promotion of well-being and healthy development for all Ontario's children. The broad recommendations are intended to provide guidance for such a reformulation rather than to present a detailed implementation plan. We believe strongly that no single model can be developed that will address adequately the need of children in all of our diverse communities. Rather we propose that these goals and recommendations form the basis of community-based discussion and planning, leading to the development of local models. In Chapter 8 we recommend structures at the provincial and local levels that would support the next stage of development.

1. Edward Zigler, "Schools of the 21st Century," Presentation to the Nexus Conference, Child, Youth and Family Policy Research Centre, Toronto, May 1989.
2. Ontario Ministry of Community and Social Services, *Better Beginning, Better Futures* (Toronto: Queen's Printer for Ontario, 1989).
3. Ontario Ministry of Community and Social Services, *Investing in Children* (Toronto: Queen's Printer for Ontario, 1987).



Chapter 6 Building an Economic Base for Children

Goal 2: An equitable economic base must be created that enables families and communities to provide for the entitlements of children.

Introduction



Chapter 5 has described a new network of supports and services for children and their families. The Committee believes that by building new partnerships and drawing up both formal and informal supports around the child and family, parents and all those who care for children will be better able to meet children's entitlements in the most comprehensive manner possible. Through a system that actively promotes children's health, the incidence of serious and ongoing problems that many children now face will be reduced.

However, the Committee also recognizes that these changes alone will not be able to address fundamental problems that stem from poverty. As we argued in Chapter 2, economic factors have placed the systems that care for children under enormous stress and have driven families, employers, unions, service providers, and governments to search for new options. Families, especially young families, are having increasing difficulties meeting the needs of their children in today's economic climate.

While the percentage of families and children living under the poverty line has declined since the recession of the early 1980s, there has not been a significant decline in the numbers of children living in poverty, despite the record number of women in the labour force. Furthermore, the situation is likely to deteriorate as we now face another recession in Ontario. The social assistance caseload is climbing, notably in the Greater Toronto area. Within such a context, a new structure of supports and services cannot hope to address effectively the host of problems associated with poverty and the stress generated within the family unit unless concomitant efforts are made to deal explicitly with the declining socio-economic status of families and young people.

The Committee believes that it is imperative the provincial government take the initiative in addressing the economic difficulties with which families now struggle. The economics of the family and the economy as a whole clearly have a significant impact on healthy child development. Child and family poverty, for example, is strongly correlated with high rates of adolescent pregnancy and school failure. The *Ontario Child Health Study*¹ showed that low income is a risk factor for poor health in children and, furthermore, that other risk factors including bad health in infancy and childhood, malnutrition,

abuse or neglect, and inadequate housing are found disproportionately among poor children. Providing for children's entitlements to health care, adequate nutrition, and housing is critical for their physical and psychological well-being.

Moreover, the future prosperity of our society is inextricably tied to the healthy development of all of Ontario's children.

Just as high school graduates who are competent and willing to work can't support a family if there are no jobs to be had at a decent wage, so expanded economic opportunities cannot be seized by young people whose health has been neglected, whose education has failed to equip them with the skills they need, and whose early lives have left them without the capacity to persevere and devoid of hope.²

It becomes increasingly important to work to break the cycle of disadvantage within which many children now live so that they have every opportunity to become healthy and productive adults.

It is of considerable concern that as Ontario moves into a period of slower economic growth, the burden of supporting a greying population rests on fewer shoulders. Policies that exhaust our natural resources, pollute our environment, and accumulate massive debt for which our children will be responsible in the future will seriously impair the ability of those same children, once they become active participants of the labour force, to sustain the supports and services upon which our whole society now depends.³ Consequently, much hinges on putting our fiscal house in order in the present as well as on developing ways to sustain and improve our existing social service structure. These goals are not contradictory. The welfare state is an important bequest to the next generation, the policies and practices of which will be critical in broad efforts to improve Ontario's economic standing.

Therefore, strategies are required to promote economic growth, to create jobs and expand training opportunities, and to ensure that parents and young people have sufficient resources to support themselves and their families. To this end, we have examined the issues of income transfers, child support, the needs of transitional-age youth, and community economic development options.

Income Transfers

The central plank in anti-poverty measures and efforts to support the family in its many forms has been the transfer of funds from one group of people to another. Income transfers, in the form of tax credits and deductions, and direct benefits such as the federal family allowance have proved to be an effective and non-stigmatizing way of putting

dollars in the hands of families. Many groups across the political spectrum argue that income transfer programs are still the best way to address child poverty and the attendant stress suffered by low-income families. The question of income transfers at this point largely revolves around the method of financing (contributory programs versus general revenues), the level of assistance, and the criteria for eligibility and ongoing support.

The report of the Social Assistance Review Committee (SARC) explored these issues in relation to the social assistance program in Ontario. We fully support the intent and the specific recommendations laid out in the SARC report, *Transitions*,⁴ with regard to children and their families. We urge the new Ontario government to take steps to implement the recommendations of the SARC report.

Specifically, benefits should be restructured and supplemented in such a way as to provide an adequate standard of living to families in need across the province. Current levels of assistance only fund individuals or families at roughly two-thirds of the poverty line as defined by Statistics Canada. SARC concluded that a market-basket approach would be the most suitable and flexible in determining the adequacy of assistance rates. The SARC report urged the province to continue to index benefits to the rate of inflation (a practice not specifically detailed in legislation), to establish a rate-setting process in legislation, and to review the formula and the levels of assistance every five years to determine whether the approach was still successful in meeting the needs of recipients (SARC Recommendations 48 and 49).

This Committee believes that the province must also move on SARC's recommendations on the definition of a benefit unit, eligibility criteria, and access to opportunity planning as these areas pertain to efforts to meet the entitlements of children. With regard to the definition of a benefit unit, the Committee agrees with the recommendation that in a one-adult family, the first child should receive the same benefit as the second adult in a two-adult family. Furthermore, the rate structure for children should assign the same level of benefit to all children in a two-adult family and to all children but the first in a one-adult family. The principle of equity must be applied in this case in order to provide for the needs of children in families receiving social assistance. By extension, any benefit that accrues to the child and is set aside for future needs should not be deducted from assistance payments as family income (SARC Recommendations 23, 24, 26, 27).

These recommendations support all children under the age of 18 who live in their family home. However, older youth have a different set of economic needs in this regard. The government has already



moved to extend income assistance to 16- and 17- year-olds who can demonstrate financial independence from their families and who agree to participate in opportunity planning, but the Committee believes that these same benefits should be available to 16-to-20-year-olds living in the family home who have demonstrated a need for financial support. Youth should not be forced to take up an independent residence in order to receive assistance when there is a clear need. In addition, a youth's failure to attend school should not be considered grounds for ineligibility. The SARC report warned against the system of "learnfare" that now exists in some states in the United States (SARC Recommendations 2, 3, 7).

In keeping with the Committee's vision for integrated supports and services, as described in Chapter 5, we also support the SARC proposals to provide opportunity planning to social assistance recipients to facilitate their transition to full financial independence. Opportunity planning involves developing an individual action plan for a social assistance recipient that builds on the recipient's existing skills and strengths. The planning process will also assess the resources and opportunities available in the community and identify activities and programs that would enable the individual to reach his or her goals. This type of assistance is critical for young people currently drawing General Welfare Assistance and for young mothers receiving Family Benefits who must plan for the future of their children as well as themselves (SARC Recommendations 71, 72, 78, 79, 88).

The economic measures proposed by SARC would greatly improve the economic situation of many young people and young families in Ontario. Special attention must also be paid to the adequacy of shelter subsidies that have not kept pace with escalating housing costs, especially in the Greater Toronto Area, where many social assistance recipients habitually spend over half of their income on shelter (SARC Recommendations 50, 51, 52, 53, 54).

Recommendation:

The provincial government must move to implement the recommendations of the Social Assistance Review Committee report, specifically as they pertain to children and their families.

Social assistance reform is crucial to improving the economic lot of poor families – especially teen mothers, who now make up over one-third of the Family Benefits caseload – but there are a large number of children in families who are working poor. The Committee reviewed the work of many groups, including the Social Assistance Review Committee, that argued that a national income

program for children would be the most cost-effective and non-stigmatizing way to secure the economic well-being of children who live in families that receive social assistance and those who live in the families of the working poor.

Ideally, this program could be built upon the existing universal family allowance program and incorporate other federal and provincial income supplementation programs, such as child tax credits, child care deductions, and social assistance benefits paid for children. The proposed children's benefit would be based upon the minimum costs of raising a child. Such a benefit would be fully indexed and cost-shared with those provinces that wish to establish a national income supplement for children.

Ontario should also consider the possibility of implementing its own supplementary child benefit program for children in families below the provincial median income level, like the programs in Saskatchewan and Manitoba.⁹ Existing income supplementation programs for families with children in Ontario are quite limited in scope.

Recommendation:

The provincial government should negotiate with the federal government to design and implement a universal income program for children based on the minimum costs of raising children.

Recommendation:

The provincial government should implement a provincial supplementary child benefit program for children in families below the provincial median income level.

Income transfer programs must go hand in hand with efforts at both the national and provincial levels to reduce the tax liability of families with children, as recently undertaken by the Ontario government in the 1990 budget. The amount that parents can deduct for dependent children has declined steadily over the past 25 years while the costs of raising children have increased dramatically.

In the interim – before the establishment of a national children's benefit package – the province should press the federal government to restore full indexation of family allowance benefits and the refundable child tax credit, abolish the non-refundable children's credit, and use the savings to augment the refundable child tax credit. Although the federal “clawback” of up to 100 per cent of the family allowance benefit, for example, only affects parents with a net income above \$50,000, it is designed so that inflation will erode this threshold level by three per cent a year, further pushing middle-income families into economic difficulties. The National Council on Welfare estimates

that \$3.5 billion will be cut from the child benefits system between 1986 and 1991 as a result of the move towards partial de-indexation.

In order to create a more equitable tax system, the provincial government should immediately take steps to examine the tax structure and the burden that parents have been forced to assume. Ontario should also take a lead role in promoting tax reform at the federal level.

Recommendation:

The provincial government must immediately review the tax system in Ontario in order to assess its impact on families and must take steps to create a more equitable system. The government should also urge the federal government to restore full indexation of family allowances and the refundable child tax credit and to abolish the non-refundable children's credit as part of federal efforts to achieve greater equity in the tax system.

Measures to address the precarious financial position of children are critical in any general strategy to transfer income to children in need. The Committee was struck by the consequences for family life of an often sudden slide into poverty or economic hardship. The waiting period between the time a parent is laid off from work and the time he or she begins to receive unemployment insurance, for instance, can place the family under immeasurable stress. Although these families can apply for emergency assistance from the general welfare office, there are no alternative funding mechanisms in place at the community level to meet this kind of need. Children's Aid Societies, for instance, can only extend assistance if a child within the family is found to be in need of protection as defined in the *Child and Family Services Act*.

This situation is another instance of dividing the needs of a child or youth among agencies and program areas. Upon the implementation of social assistance reform, serious effort must be given to integrating economic support with other supports and services for the child and family.

Recommendation:

The provincial government must move to integrate income support, including emergency funding for children and their families in temporary need of financial support, with other service areas so as to serve children and their families in a more integrated way.

In sum, the consequences for children in families hurt by the economic downturn and by the erosion of community supports are profound. Supports and services and widespread commitment to the

Child Support



welfare of children must go hand in hand with generous income support for young families and a broader examination of the distribution of wealth so that the entitlements of all children with varying needs can be met. We strongly recommend that the provincial government develop a firm timeframe for the implementation of measures to eliminate child and family poverty in Ontario.

Recommendation:

The provincial government must develop a firm timeframe for the elimination of child and family poverty in Ontario.

Another group of children at significant risk for social, emotional, and psychological problems are those children who experience a significant drop in their standard of living upon the divorce or separation of their parents. Improving child support and maintenance enforcement mechanisms, therefore, is crucial to support these families.

The amendments to the federal *Divorce Act* in 1985 did not establish clear criteria for child support payments, nor are there guidelines detailed in other provincial legislation such as the *Family Law Reform Act*. The Committee believes that the province should move to establish child support schedules, fully indexed to the cost of living, in order to ensure that children of divorced or separated parents continue to enjoy financial security. Specific formulas should be developed to reflect both the financial position of the parents and, most importantly, the financial needs of the child.

The Committee believes that children are entitled to live at the standard of living that they would have enjoyed had their parents not separated; their entitlement to material security should not be jeopardized. This axiom is now referred to in Canadian jurisprudence as the Parris principle. At the moment, some courts do refer to the Paris principle in determining support awards. However, we believe that this principle must be embodied in provincial and federal regulations to ensure its universal application.

Such a provision, however, would not assist children in families where both parents are poor before and after separation. Thus, it is important to move at the same time on proposals to institute a children's benefit program and supplementary income initiatives for those families who require higher levels of assistance to provide for the entitlements of their children.

A set schedule of child support payments would have the added benefit of reducing the level of tension and acrimony that often accompanies divorce proceedings. Ideally, both parents would be required to meet with a mediator to establish support payments and

division of assets so as not to add to the backlog of court cases that now exists. Fully indexed support payments would also prevent the need for many custodial parents – usually women – to return to court after a time to petition for an increase in support payments to meet rising costs of living. To establish such a system, the government would have to assess the responsibility of each parent in the event of remarriage, an issue that at present is left to the discretion of individual judges.

Recommendation:

The provincial government must establish a fixed schedule of support payments to guide the determination of child support obligations. This schedule should seek to ensure that children are able to enjoy the standard of living that they would have had if their parents had not separated. The schedule must be fully indexed to the cost of living.

Established support schedules must go hand in hand with strong enforcement mechanisms. In Chapter 2, it was noted that 63 per cent of support orders were in full or partial default within four months, and that by the end of the first year, 87 per cent were in some degree of non-compliance. After the first year, 60 per cent of non-custodial parents did not contribute anything to the financial support of their children.

The government of Ontario has established a public maintenance advance system called the Support and Custody Order Enforcement (SCOE) program. It provides a minimum guaranteed income to children within families where the supporting parent either refuses or is unable to meet court-ordered support obligations. When the order falls short of the guaranteed minimum level, or when the supporting parent defaults on his or her support obligation, the public maintenance system makes up the difference in the first case and advances payment to the family in the latter case. Defaulted maintenance orders are enforced by income deductions at source against the defaulting parent.

Given the breadth of the problem, and the dire consequences of financial insecurity for children, the Committee believes that the capacity of the SCOE system must be expanded and strengthened so that all custodial parents receive a guaranteed minimum income regardless of the actions of the non-custodial parent.

Recommendation:

The provincial government must strengthen and expand the capacity of the public maintenance advance system in order to provide a minimum guaranteed income to children and their families in all instances where the supporting parent either refuses or is unable to meet court-ordered support obligations.

Another measure that the province should consider is changing the provision within income tax legislation that requires the custodial parent to pay tax on child support payments. While the non-custodial parent can claim a deduction for child support payments on his or her tax form, custodial parents, usually mothers, pay tax on this money, obviously reducing its value. Ideally, the province and the federal government should address this issue jointly.

Recommendation:

The provincial government must amend personal income tax regulations that require custodial parents to pay tax upon child support payments to remove the burden of double taxation upon the parent; and it should urge the federal government to take similar action.

The Committee believes that if all children are to enjoy the material basics of life, the full range of social and economic policies and practices must be assessed in order to determine whether they truly support children's entitlements. Policies and legislation governing separation, divorce, and child support are excellent examples of measures that obscure the needs of children. If the principle that children have first call on concern and resources were systematically enforced, marital assets would be divided equally among all members of the family, and measures to guarantee adequate levels of child support, such as those discussed above, would be instituted.

The economic strategies to address child poverty discussed above will transfer dollars to families to better enable parents to provide for the needs of their children. In particular, young children will directly benefit from a national children's benefit or a stronger child support enforcement program. Older children, those in their teenage years, face a different set of economic needs. Many of these youths are themselves in the labour force, combining school and part-time work, or are on their own attempting to make ends meet. Many teen mothers live independently, drawing Family Benefits because of the serious lack of both educational and work opportunities for themselves and a lack of support services such as affordable child care for their children. This group of adolescents demands special attention to assist their transition to adulthood.

*Transition from
Adolescence to
Adulthood*

The previous chapter looked at the specific sorts of services and supports that adolescents and transitional-age youth need. In this chapter, we will look at the economic problems that youth face, including their sometimes precarious position in the labour market.

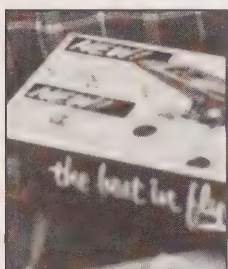
If we as a society are committed to providing for the entitlements of children, we must look seriously at the availability of financial resources for youth, particularly those between the ages of 16 and 18. Young people who leave home, by force or by choice, usually have very few resources. Family Benefits are available for young mothers 16 and over, and General Welfare Assistance has recently been extended to the 16-to-18-year-old group if the individual can prove that he or she is financially independent from his or her family. However, access to help remains difficult. As noted above, there are no alternative community funding mechanisms in place to meet the needs of this group. Young people must, therefore, seek out assistance from a variety of sources, moving between programs sponsored by different levels of government and different ministries.

Recommendation:

The provincial government must work to consolidate supports and services to transitional-age youth, including financial assistance bridging interministerial and intergovernmental program barriers.

The area of training and educational support is critical in this regard. A very high proportion of all youth now work in the paid labour force, either part-time or full-time (about 1.4 million in Ontario between the ages of 15 and 24).⁶ Youth most often find work in the lowest-skilled and most poorly paid sectors of the economy. Furthermore, the youth unemployment rate is proportionately much higher than the rate for adults, as the youth labour market as a whole is highly susceptible to economic cycles. Young people suffered the most significant losses in wages and job security through the recession of the early 1980s.

Declining numbers of young people, relative economic prosperity, and a number of federal and provincial government initiatives have improved the situation somewhat, but many argue that these gains are temporary and that the needs of youth that face the most serious difficulty in gaining access to the labour market have not been met. In fact, an imminent recession is already eroding the tenuous position of youth in the labour market. There are two issues: first, the conditions of the youth labour market, and second, training and educational concerns. Because youth and young parents will continue to work in the low-wage sector, government must move to improve the conditions of work within this area.



Recommendation:

The provincial government must review minimum wage rates, the availability of benefits, and the working conditions of part-time labour in order to legislate greater protections for young people in the labour market.

In regard to training, as the Ontario economy shifts towards knowledge-intensive, higher-skilled activities, employment opportunities for youth will be quite different in the future. Youth who drop out of school or do not pursue additional training will be significantly disadvantaged in the economy of the future as they start to compete for employment with older workers. They will be increasingly relegated to low-wage service jobs requiring little education and training and consequently will find it difficult to break out of the marginal labour market.

The education system has already begun to institute new programs to meet the changing educational needs of young people. For example, the cooperative educational program – which allows students to combine school and on-the-job training in the workforce – has been working successfully in many school districts. This program is an excellent example of how schools and business are working in partnership to better meet the needs of youth and the evolving labour demands of the economy.

The Committee also urges that apprenticeship programs, which have a long history in European countries, be further developed in order to provide a broader range of alternatives to university and college post-secondary education. The report of the Premier's Council on Technology, *People and Skills in the New Global Economy*, specifically addresses training issues and concludes that the ailing apprenticeship system demands attention. It recommends that an apprenticeship board should be created to revamp the Ontario industrial apprenticeship system. Its main job would be to regulate access to and certification of a wide range of occupations. It would be responsible for developing new ways to expand training opportunities for young people and would attempt to promote apprenticeship training as an attractive alternative to university education.⁷

Recommendation:

The provincial government, in conjunction with local community representatives, must expand cooperative education and apprenticeship programs for youth and establish support programs for these students that would include financial assistance and housing where necessary.

The provincial government can also play a large role in encouraging employers and labour organizations to participate more actively in developing meaningful training opportunities for young people. Employers and labour have a vested interest in ensuring a highly trained work force and a labour supply for future economic prosperity. The government can offer financial incentives to companies that institute and maintain apprenticeship programs by, for instance, sharing in the costs of training or assigning preference to organizations with these types of programs in competitions for government contracts. Drawing as many employers and labour organizations as possible into a province-wide network of training initiatives, would reduce the dangers for individual groups who undertake training, including raiding by other firms or services in a similar field.

Recommendation:

The provincial government must encourage employers and labour organizations to invest in young people by increasing training opportunities and supporting community economic development through financial incentives and other measures.

Training programs must also be available to those young people who are no longer in the formal educational system but require accessible and affordable training to move out of the low-wage ghetto. Ideally, these types of services must be grouped with others such as counseling, life skills training, and job placement. Material assistance in the form of food, housing, and financial support for poor youth or others living on their own is also necessary to support their efforts to pursue education and to ensure access to these types of programs. Often the very exigencies of the economy drive youth to take on employment, thus jeopardizing their chances to pursue higher education in order to escape poorly paid and dead-end job ghettos.

**Community
Development**

All the initiatives to address the economic security of families and young people must be located within a larger program to strengthen the economic and social health of communities across Ontario. Just as the well-being of the child must be measured within the context of the well-being of the family, so too must the well-being of families be understood within the context of healthy communities. We understand community development as activities that draw together both public and private resources to identify broad needs within the community and to develop and implement local strategies to address those needs. In essence, community development is a strategy involving partnership with community members to solve problems and to

local resources and skills to build self-sufficiency and well-being within the community as a whole. Research has confirmed the vital link between children's health and the viability of the communities within which they live, learn, and play. Nowhere has this lesson been as amply illustrated as within our native and northern communities. Efforts to combat poverty and structural inequities in the labour market must be understood within the broader milieu of the community and the myriad of activities that generate and sustain economic activity.

The first step in any effort to create and sustain economic development must be the development of local planning capabilities, in order to chart economic trends within a specific area and identify proactive measures to manage change. Ideally, community-based groups comprising business, labour, the voluntary sector, and concerned individuals should be supported by each level of government to foster local economic planning and establish links between other planning organizations, including those that strive to meet the entitlements of children. Each organization should have funds at its disposal to move on projects that it concludes are significant for the economic health of the community.

Some communities have already established these kinds of planning mechanisms, and government must move to strengthen existing initiatives and support the development of others. In particular, priority for government assistance must be given to vulnerable communities experiencing economic, employment, and population loss. Priority must also be given to diversifying the employment base in northern, single-industry, and native communities.

The provincial government can further assist communities struggling with economic difficulties by extending direct government investment, underwriting loans for worker-owned enterprises, or providing wage subsidies to assist local business to pay "liveable" wages. Research has illustrated that initiatives that improve the economic performance of a given local community or the economy as a whole decrease the incidence of poverty. The best solution to child poverty is to ensure that parents of working age can find jobs that pay decent wages. Specific measures that address pay equity and employment equity for disadvantaged groups in the labour market, such as sole-support mothers, must supplement economic strategies so that the benefits of economic development are spread more equitably and all families are better able to provide for the entitlements of their children.

Recommendation:

The provincial government, in conjunction with community representatives, must develop and strengthen the capacity of communities to participate effectively in social and economic planning and in management of activities at both the provincial and local levels.

Ideally, all supports and services for children and their families that are offered through informal or formal service providers, employers, labour organizations, or other community groups should incorporate community development measures. The *Better Beginnings, Better Futures*⁸ initiative discussed in Chapter 5 is a recent example of a large interministerial project that stipulates that a community development component be incorporated into the design and delivery of promotion and prevention services for vulnerable children.

The Committee believes that the same requirements that are necessary to support and to underscore promotion and prevention efforts at the community level are equally necessary to highlight community development initiatives. Moving towards greater coordination of policy sectors in the design and implementation of supports and services at the central government and local community level will necessarily strengthen the capacity of families and society as a whole to care for children.

Recommendation:

The provincial government must require that organizations that receive government funding incorporate a community development component into the structure of their support or service. Where there is no direct funding relationship, the government should provide incentives to other representatives of the community to support community development initiatives.

Conclusion

The central thesis of this chapter has been that economic supports for children and their families are critical measures in the effort to provide for children's entitlements within a community. Chapter 2 described the detrimental impact of family poverty and the reduced life chances that children who live under these conditions face; here we have tried to explore concrete measures for change at this time. The bottom line is unequivocal: there must be adequate financial resources and employment opportunities at wage levels commensurate with the cost of living to ensure that families can meet the basic material needs of their children.

In the next chapter, we turn to another significant facet of the support system for children and families: legislation that shapes the structure of supports and services and sets the parameters of employment and working relationships. Here too, the Committee believes, greater effort must be made to entrench the entitlements of children and lay the groundwork for greater integration of supports and services.

1. Ontario Child Health Study, *Summary of Initial Findings* (Toronto: Queen's Printer for Ontario, 1986).
2. Lisbeth Schorr, *Within Our Reach: Breaking the Cycle of Disadvantage* (New York: Doubleday, 1988), p. xxiii.
3. See Economic Council of Canada, "Providing for Future Generations," *Legacies: Twenty-Sixth Annual Review* (Ottawa, 1989) for a discussion of intergenerational transfer.
4. See Social Assistance Review Committee, *Transitions* (Toronto: Queen's Printer for Ontario, 1988).
5. *Ibid.*, pp. 112-118, for a discussion of a Children's benefit.
6. Pamela Sloan, "School to Work Transition," Paper commissioned by the Child, Youth and Family Policy Research Centre, Toronto, May 1989, p. 3.
7. Premier's Council on Technology, *People and Skills in the New Global Economy* (Toronto: Queen's Printer for Ontario, 1990), p. 146.
8. Ontario Ministry of Community and Social Services, *Better Beginnings, Better Futures* (Toronto: Queen's Printer for Ontario, 1989).



Chapter 7

New Directions for Children's Legislation

Goal 3: Laws that affect children directly or indirectly must be written or amended to express and give force to their entitlements.

Introduction



Provincial legislation can shape the ways in which the members of our society carry out their responsibilities in securing the entitlements of children. Legislation has the power to create a climate for change or to exacerbate existing problems. The Committee believes that the government must lay the groundwork for the provision of children's entitlements by writing appropriate laws and amending defective ones.

The legislation governing children's services in Ontario has been of concern to us throughout our deliberations. A background paper on the legislation relevant to children and their families was commissioned. As a result, we have been able to assess in detail the strengths and weaknesses of the legislation governing children's lives.

Three themes emerged for us through this examination: first, the lack of an underlying commitment to children's entitlements in the legislation that shapes children's lives; second, inconsistencies throughout this body of legislation that entrench the boundaries between the services intended to support children and their families; and third, the fragmented nature of the court system itself, which limits the capacity of the judiciary to rule in the best interests of the child. Each of these problems is manifested in the different pieces of legislation that we examined.

We have highlighted in the following discussion a number of specific concerns in different laws directly affecting children, most notably the *Child and Family Services Act (CFSA)*. Our specific recommendations regarding the young offenders system are set out in a separate section.

In Chapter 3, we presented our conviction that the government and all members of society whose lives touch children must make a commitment to providing for children's entitlements as a starting point to changing the way that society as a whole supports their healthy development. Children's entitlements were broadly defined to encompass both the "rights of procedure" and the "rights of substance." The notion of entitlements encompasses both procedural and substantive rights. By rights of procedure we mean provisions of due process; rights of substance, on the other hand, are the rights of an individual to the necessities of life.

It was argued that the concept of "entitlements" escapes the adversarial

Legislative Principles and Entitlements for Children

tone that the concept of “rights” has assumed in light of court challenges mounted by civil rights groups and conveys a sense that there is a collective social responsibility to ensure that the entitlements of all children are realized.

Generally, governments have moved to entrench procedural rights, the inclusion of which has provided disadvantaged groups in particular with the opportunity to question and examine the nature of the state’s intervention into their lives. However, there has not been a commensurate guarantee of rights of substance, which include the following entitlements:

- personal growth and development;
- decent and adequate shelter;
- nourishment that is both adequate and nutritional;
- meaningful education that is appropriate for the child’s level of ability;
- timely protection against abuse;
- a *real* opportunity for a dependent child to have a significant role in any court proceeding deciding his or her future.

Although it may be difficult to enforce all rights of substance, their very existence in legislation will increase government’s responsibility to provide for the entitlements of children. Without a firm legislative commitment to the rights of substance, rights of procedure may produce a healthier process but achieve little for a child’s basic needs.

Consequently, the Committee has concluded that the government must move to guarantee both substance and procedure. A ***Statement of Entitlements*** must appear as a preamble to all legislation that affects children and must be incorporated into relevant sections of other legislation. Following from this, the narrow definition of “in need of protection” within the *Child and Family Services Act* (Section 37(2)), for example, must be amended to include the failure to provide for children’s entitlements, including neglect.

The *Education Act* and the various statutes governing the delivery of health care are other examples of current legislation that will have to be modified to incorporate a commitment to the provision of children’s entitlements. The ***Statement of Entitlements*** must also form part of the guiding principles of central policy development and advocacy for children and form the basis of province-wide minimum standards of care.

We view a legislative commitment to children’s entitlements as the centrepiece of all future government action with respect to children and their families. In keeping with this goal, both the provincial and federal governments should move immediately to ratify the principles of the United Nations *Convention on the Rights of the Child*.

Recommendation:

The entitlements of children must be incorporated in all existing and new legislation and also in policy that directly or indirectly affects the lives of children.

Recommendation:

The provincial government must immediately ratify the principles embodied in the United Nations *Convention on the Rights of the Child* and should urge the federal government of Canada to do so also.

There are a number of inconsistencies in the tests and standards against which judges evaluate the needs of the child and possible solutions in a given case. Similarly, there are inconsistencies with regard to the age of consent, qualification for services and programs, and the right to judicial interview, review, or hearing.

1. Tests and Standards

The Committee believes that all existing legislation should be reviewed and amended to confirm that “the best interests of the child” constitute the predominant test to which a child is entitled at *every stage* of contact with any court or mandatory service. Such a standard should apply in *all* circumstances; the use of the standard in the provision of public or private services will provide the consistency that is sorely needed within the current structure of fragmented children’s services.

It will be necessary to seek out inconsistencies with regard to the test of “best interests” both across children’s legislation and within individual statutes. For example, Section 47(3) of the *CFSA*, concerning the designation of a child as a temporary ward of the state, directs the judge to do so on the grounds that “the court is satisfied that there are reasonable and probable grounds to believe that there is *a substantial risk to the child’s health or safety* and that the child can not be protected adequately by an order under clause (2) (a) or (b)” (emphasis added). This section has been interpreted narrowly by the judiciary despite the fact that an overall “best interests” test is embodied in Section 1(a) of the Act.

Within this same section of the *CFSA*, the court can offer protection to a child only after the child has been designated a permanent ward of the state. When the child is only a temporary ward, awaiting the final court proceeding, parents can abduct that child without fear of legal retribution because the Children’s Aid Society cannot bring charges against the parent(s) given the regulations of the Act. Clearly, this anomaly hinders the court’s or an agency’s ability to secure a child’s entitlement to protection. These examples illustrate the need to clarify

the provisions for the test of “best interests” within statutes such as the *CFSA* so that judges can be clearly guided always to rule in the child’s best interest.

The Committee believes that the “best interests” test should be embodied in all legislation affecting children. Such a legislative amendment would be critical in the effort to secure children’s entitlements. Highlighting the principle of “best interests” would prompt service providers, policymakers, and the judiciary to re-evaluate current legislation, policy, and practice in light of their impact on the well-being of children and families.

Recommendation:

All relevant legislation should be amended to reconfirm that “the best interests of the child” constitute the predominant test to which the child is entitled at every stage of contact with the courts or mandatory services.

2. Placement

In cases where placement of a child is being considered, the Committee believes that decisions should be governed by children’s fundamental entitlements. The *CFSA* is explicit in several places that “placement” must be the “least restrictive” or “most appropriate” placement possible. One problem that has emerged, however, is that some judges have ruled that the principle of “least restrictive” placement takes precedence over the principle of “most appropriate” placement.

Ideally, amendments to legislation to ensure that the test of “best interests” will be paramount in all decisions governing children’s lives will address this inconsistency. In some instances, a judge might rule that keeping the family together with supports or placing a troubled child in a less restrictive community placement as opposed to an institutional or treatment setting is a less intrusive or more appropriate placement if the “best interests” test were clearly enshrined as the predominant test.

In other pieces of legislation affecting children, similar guarantees that placement be the least restrictive and most appropriate do not exist. In the *Education Act*, there are no provisions that “placement” be interpreted as a right to an integrated school environment. Similarly, a *Mental Health Act* “placement” does not require that a “less restrictive” or “most appropriate” placement be canvassed and eliminated prior to placing an involuntary patient in an institution.

A clear guarantee of the right to the most appropriate placement would better ensure children’s entitlement to consistency of caring relationships. Appeal to the “best interests” test would ensure that

courts and social service agencies address children's entitlements in order to better serve and support children in their home communities.

The Committee believes that the government must establish legislative guidelines to require that children should be served in their "familiar" community – family, school, neighbourhood – before being removed for treatment or protection. This will provide two benefits: first, children will not experience unnecessary and often traumatic disruptions; and second, the network of supports and services to children will be forced to expand its capacity and its sensitivity to the individual needs of children rather than creating uniform service criteria into which a child must fit before services are extended. By extension, efforts to ensure that children are supported in the most beneficial way possible will also require the development of innovative programs and residential options for those cases when keeping children in their homes or immediate communities will not serve their best interests.

Recommendation:

Legislation involving the placement of children, notably the *CFSA*, must be amended to require a primary guiding principle of consistency of caring relationships within the child's "familiar" community, where consistent with the best interests of the child.



3. Procedural Rights

The question of age is problematic. Young people between the ages of 16 and 18 are particularly at risk for being arbitrarily withdrawn from programs offering social supports and services because of their age (depending upon the legislation, this could occur at age 16, 18, or 21).

Ultimately, flexible criteria are needed if the best interests of children are to be protected. This is especially true in cases where children or adolescents are arbitrarily refused a particular program or benefit despite their own wishes or demonstrated need. The termination of Crown wardship is an excellent illustration of this issue. The Committee fully endorses the recommendation of the SARC report that the *Child and Family Services Act* be amended to extend Crown wardship from age 16 into adulthood (if the ward consents) and to limit the power of the court to terminate Crown wardships earlier if consent is withheld. Similarly, a Children's Aid Society should be empowered to offer protection and support to youth over 16.

Legislation must also be reviewed with a view to examining ways to achieve greater uniformity regarding the appropriate age for consent, which may vary from one statute to another. Age is ultimately a subjective standard: one 13-year-old may be capable of making sound decisions on whether to proceed with a medical procedure without parental consent, while another may not.

Children must also enjoy in a consistent way the right to legal counsel, which is currently not formally provided in the *Children's Law Reform Act (CLRA)*; the right to a judicial interview, which is currently provided in the *CLRA* but not specified under the *CFSA*; and the right to participate in reviews determining their benefits or liberties. In addition, children must enjoy the right to therapeutic assessment provided at the earliest possible moment across service systems. The *CFSA*, for example, provides only for therapeutic assessment after a child is found to be "in need of protection" as defined within the Act (Section 50 (1)). Judges must be granted the authority to order therapeutic assessments and interventions when necessary in order to avert unnecessary delays and the emotional trauma for the child that delay engenders.

Recommendation:

All legislation affecting children and their families should be critically evaluated in order to establish legislative consistency with regard to age, access to judicial review, legal counsel, therapeutic assessment, and the entitlement to participate in reviews determining their benefits or liberties.

There have been instances when Family Court has been unable to intervene "in the best interests of the child" because of perceived legislative constraints in the *CFSA*. The Committee believes that a Unified Family Court at the superior level would ensure that children's entitlements are met. Such a court would automatically give broad powers to all judges who would be empowered with *parens patriae* authority: first, to address a child's immediate need for protection or treatment; second, to consider alternatives to assist the child; and third, to have the power to act despite the lack of specified statutory authority to intervene on behalf of children faced with unexpected abuses.

At present, Family Court judges are limited by the letter of the law with regard to the tests and standards against which they evaluate a given case and the options that are available to them when making a ruling. For example, a judge cannot challenge the authority of a Children's Aid Society to place or transfer one of its wards to or from a particular setting, unless there has been a clear abuse of statutory authority. In a Unified Family Court the judge would have an overriding authority to assess whether this placement was "in the best interests of the child" and could order that alternatives be found to serve a child in his or her own family or community.

A Unified Family Court should hear all cases concerning the welfare of children. This would mean, for example, that Unified Family Court

judges would preside over criminal cases dealing with child abuse and neglect. The Committee believes that Unified Family Court judges would bring greater sensitivity and knowledge to cases where a child's fundamental entitlements have been violated or are at issue.

Recommendation:

The provincial government should create a Unified Family Court at the superior level, where each judge will be vested with broad powers and discretion to rule in the best interests of the child at all times.

Given that a child's experience of the adversarial nature of the court system can compound the trauma and amplify the impact of the problems that have brought the child to court, the Committee supports current efforts to establish alternative dispute resolution mechanisms, such as mediation in child custody cases. A number of experiments are under way, including a project sponsored by the Children's Aid Society of Metropolitan Toronto and another broader project in Hamilton. The Committee encourages the government to continue to support and fund projects with a view to establishing local, accessible mediation programs across the province. Ideally, mediation might be established as a parallel public system to the now overloaded court system.

In the interim, the province should move to provide protection for child witnesses testifying in Family Court, similar to those protections that are now available to children under the Criminal Code. The Child Witness Program sponsored by the London Family Court Clinic, whose funding was recently cut, was an example of such a program.

Young Offenders

The Committee has serious concerns about the way the *Young Offenders Act* (YOA) system is working. There is a backlog of demand for access to treatment programs; there is need for a commitment from the Ontario government to a full-fledged diversion program for young offenders; the division of services between the Ministry of Community and Social Services and the Ministry of Correctional Services (MCS) creates anomalies in the way young people are housed and provided with services; and the system of two judicial "phases" is abusive of young people's basic entitlements.

The division of authority between the MCSS and MCS, and between Family Court and Criminal Court judges, arose because Ontario traditionally treated anyone over 16 as an adult in the court system. When the 1984 *Young Offenders Act* changed the age for admission to adult court to 18, the provincial government did not change either its judicial or its administrative structures to complement the new legislation. As



well, Part IV of the *CFSA*, which deals with young offenders pertains only to those over 12 and under 16, and not to all children up to 16, as does the rest of that Act.

The two ministries do work together on some common policy issues and operational concerns. There are fundamental differences, however, between the facilities and the support services provided by each. The Ministry of Community and Social Services is more attentive to the needs of children. The major job of the Ministry of Correctional Services is the incarceration and supervision of adult offenders. MCS separates young offenders from the adult population, but the facilities, staff, and services have a more “correctional” orientation, arguably more appropriate for offenders over 18. MCSS deploys child development workers and group homes.

Separation of services to children is also reflected in the court system: Family Court judges hear cases involving children under 16, and Criminal Court judges hear cases involving the 16- and 17-year-olds. Now that all judges are members of the Ontario Court of Justice, Provincial Division, it will be both possible and logical to have one consistent group of judges hear all young offender cases.

We know that there can be major differences between 12-year-old and 17-year-old offenders. However, each case must be assessed on its own merits; the assessment should not be based simply on age. The system should be reorganized so that it can operate as a single system, under a common philosophy, integrated judicially and administratively.

Recommendation:

The young offenders system in Ontario should be integrated judicially, administratively and philosophically. The provincial government should amend the *Child and Family Services Act* to include all children aged 12 through 17 in Part IV dealing with young offenders. Responsibility for 16- and 17-year-old offenders should be transferred from the Ministry of Correctional Services to the Ministry of Community and Social Services.

The YOA provides for diversion from regular court proceedings for young people alleged to have committed criminal offenses. The federal Act does not speak to the specifics of this program, other than stipulating that diversion programs must be authorized by the Attorney General of the province or a delegate.

In Ontario, a young person must be charged with a relatively minor crime to be eligible to apply for the alternative measures program. The youth must appear in court and the crown unilaterally decides whether the case is an appropriate one to be referred to the alternative

measures program. Probation officers make the final decision regarding acceptance and are responsible for supervising the young person's completion of the "measure". The majority of young people perform community services. Once the measure is completed, the charges are withdrawn in court.

Ontario has had an interim alternative measures program since 1988. MCSS probation offices provide this for 12 to 15 year-olds and the Ministry of Correctional Services for 16- and 17-year-olds. The interim program was established in response to a court challenge launched in 1986 which claimed that Ontario's failure to implement an alternative measures program as defined in the *Young Offenders Act* (Section 4) was unconstitutional. The Supreme Court of Canada has since ruled in favour of the Ontario government in June, 1990. The interim program remains in place pending an interministerial review to determine its future. It is the Committee's understanding that the program is used for a very limited number of offenses only.

The Committee urges the Ontario government to make a commitment to a full-fledged diversion program. It should also amend other provincial legislation to allow for alternative measures. At present, a young persons charged with trespassing is not offered a diversion program because existing law does not allow it.

Recommendation:

The provincial government must make a commitment to develop a full-fledged program of alternative measures as provided under the *Young Offenders Act*.

Recommendation:

The provincial government must amend the *Provincial Offences Act* to incorporate provisions for diversion programs for young people similar to provisions in the *Young Offenders Act*.

Some of our concerns require legislative change by the federal Parliament. For example, Section 22 of the *Young Offenders Act* gives a young offender the right to refuse treatment, even if he or she is convicted of a serious offence involving violence. The Committee believes that this right of refusal by the individual should be tempered by a recognition of the rights of the community for protection. A violent offender should not merely be held in custody or warehoused for up to three years and released without having received any treatment directed to correcting the problems which led to the violence.

Recommendation:

The provincial government should request the federal government to amend Section 22 of the *Young Offenders Act* to provide a better balance between the rights of the individual to refuse invasive treatment and the rights of the community to protection.

The Committee is also concerned about the bail directives which are used in Ontario for young offenders. It is more difficult for young people to be released pending trial. The test of “connection to the community” tends to be a problem for young runaways because they cannot prove they have a fixed address even though they may be staying with friends. There should not be a higher test for young people than for adults. This is an issue that can be dealt with through a policy change by the Ontario government.

Recommendation:

The provincial government must re-examine bail directives for young offenders to ensure that the test of connection to the community is not more stringent than the one applied to adults.

Other Policy Recommendations

The Committee has discussed two other proposals for change affecting current children’s legislation. First, we strongly encourage the province to urge the federal government to amend Section 43 of the *Criminal Code* to prohibit anyone (including parents and teachers) from using corporal punishment with regard to children. The *Criminal Code* now allows “reasonable” force to be used on a child for correctional purposes by parents, teachers or a person acting with parental authority. This provision reinforces the attitudes of those who believe in using force against children.

It also results in inconsistencies within the province in that some school boards have banned the use of corporal punishment and others have not. Prohibiting corporal punishment would clearly demonstrate the federal and provincial governments’ commitment to ensuring children’s basic entitlement to freedom from harm. In a culture, where there are real concerns about the level of violence that children live with in their day to day lives, we must establish an alternative understanding of parenting that recognizes that children’s experience of violence jeopardizes their chances of healthy development and teaches them that physical violence in certain instances is acceptable behaviour.

Recommendation:

The provincial government should press the federal government to amend Section 43 of the *Criminal Code* to prohibit anyone, including parents and teachers, from using corporal punishment upon children.

Second, the provincial government has been reviewing the issue of truancy since April 1984. It must establish a new philosophy regarding truancy in order to develop alternatives to “banishment” from school for the child who does not attend. Indeed, this solution to the truancy problem is a contradiction in terms and wholly ineffective in addressing the reasons that children and adolescents stay away from school or drop out before the age of 16. The current inconsistencies and confusion surrounding the issue of truancy in the *Education Act* clearly need to be addressed in light of children’s entitlements and the supports that are necessary for children in their pursuit of meaningful education.

Recommendation:

The provincial government must immediately establish a truancy philosophy and enact appropriate legislation embodying the entitlements of children in order to ensure continuity of care for children within their “familiar” communities.

Conclusion

The Committee believes that specific reforms of legislation that governs children’s services together with changes within the legal system will provide a basis upon which to forge new community partnerships in an extended network of care for children. The *CFSA* was largely regarded as “ground breaking” legislation in the field of specialized children’s services when it established the principle of “best interests”. However much work remains in order to extend our philosophy of children’s entitlements across all legislation touching children’s lives and to address the inconsistencies within specific legislation that impairs the ability of the courts to ensure that children’s entitlements are upheld.



Chapter 8 An Integrated Framework for a Children's System

Introduction

Goal 4: Government must become the leading partner in creating a public agenda for children and in establishing an integrated framework that ensures that the entitlements of children are met through a holistic system of supports and services.



This Committee was set up in 1988 because the Minister of Community and Social Services at the time saw that children were falling through gaps in the traditional safety net of services and wanted to know what government could do to remedy this. We have concluded that government must lead a partnership committed to creating an agenda for children, and that an integrated framework must be established which ensures that children's entitlements are met through a holistic system of supports and services. To be holistic, those supports and services must take into account the needs of the child in the context of family, school, and neighbourhood, and they must serve the child as a whole person, rather than as a problem or a category of care.

The system we now have for serving children in this province is made up of several provincial ministries, hundreds of local authorities, and over a thousand agencies. They all have their own mandates, catchment areas, resources, and accountabilities. Providers of services, whether branches of provincial ministries or voluntary-sector agencies or local governments, endeavour to meet their own responsibilities and their own agendas. But there is no governing framework to pull the network together. There is no real system for children.

We must create a children's system that has a shared vision of children's entitlements. We must establish mechanisms to put the vision into practice and to make the system workable. The purpose of unifying the system is not simply to promote administrative convenience; it is to allow us to approach solutions differently. The Committee's recommendations in this report require a system that is able to respond in a systematic way to the entitlements of children. If the system continues to operate as a series of disconnected parts, it is unlikely we will be able to break out of our old ways of looking at children's services.

Ontario must establish a new public agenda for children – one that places the entitlements of children front and centre – and a framework that will cause changes to occur. We do not believe that the government should be solely responsible for implementing the new agenda, but it must set the direction and maintain the momentum for change in the system. Creating this new, cohesive system will require the participation of all the partners as well as leadership from the provincial government.

This chapter describes how the Committee would establish an integrated framework. The first section provides definitions of terms that the Committee has used. Three sections then discuss briefly the changing context, aspects of the Ontario experience, and selected experience from other jurisdictions. Next, we discuss the children's agenda and our ideas for an integrated framework at the provincial and local levels, and we describe interim steps to achieve our longer-term goal.

We conclude with recommendations for a permanent Children's Advisory Committee and a mechanism for implementing the directions in this report.

Defining Terms

One of the difficulties in discussing issues such as coordination and integration is the possibility of confusion over the use of terms. This section is intended to clarify how the Committee has used the following terms:

- *Collaboration*: independently run organizations working in association with others through informal links, often through personal contacts between social workers, physicians, teachers or others.
- *Coordination*: adjustment of relations between organizations or parts of organizations to harmonize goals and plans; this implies relinquishing some ability to act unilaterally.
- *Integration*: the merger or amalgamation of functions, which could involve consolidating management, planning, administration or services or all of these functions.
- *Decentralization*: the transfer of responsibilities to a regional, area, or local office of the provincial government.
- *Devolution*: the transfer of service system decision-making authority to the local or community level.
- *System Management*: authority for planning, priority-setting, and allocation of resources for a range of services that may be delivered by various service providers within a service system; distinct from operational management of services carried out by providers.
- *Local Level*: may vary because local catchment areas for different organizations and jurisdictions overlap. For example, there are 13 MCSS area offices; the Ministry of Health gets advice from 28 District Health Councils; municipalities in southern Ontario are organized at the upper-tier level by region or county; school boards have overlapping boundaries and some boards include more than one municipality in their jurisdiction.

A Changing Context

The Committee's work on children's issues has taken place in a changing context. An emphasis is emerging within the provincial government on improving links among ministries with related functions. Reviews are being conducted within the public service to study how the organization of ministry functions might be altered to enhance the provision of services. There is a focus on moving management responsibilities, particularly in the area of health and social services, to the local level, either through decentralization or devolution.

For example, the Premier's Council on Health Strategy has been considering options for devolution of responsibility for managing health and social services from the provincial government to a local authority. Options might include municipal government or an appointed health and social services organization that would have responsibility for an integrated system of health and social services at the local level.

An interministerial committee of Assistant Deputy Ministers of Community and Social Services, Health, Education, and Tourism and Recreation has been created to deal with overlapping concerns and strategic directions, with a particular focus on children.

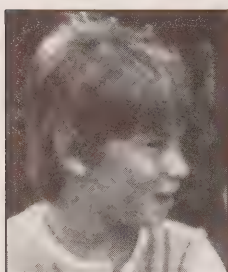
There is a strategy in place for development of a new long-term care system for elderly and disabled persons. It involves integration of functions heretofore carried out by separate ministries (MCSS and Health) and decentralization from Queen's Park to the local level. MCSS already has a network of area offices situated around the province, but MOH does not.

The two ministries share an Assistant Deputy Minister for Community Health and Support Services, who is in charge of developing the new long-term care system. The initiative involves establishing health and social services offices in 14 centres across Ontario to manage the long-term care system. These local offices will be responsible for program coordination, financial management, and service monitoring.

The document *Strategies for Change: Comprehensive Reform of Ontario's Long-Term Care Services*¹ (1990) explains that local service access organizations will be created to handle information and referral, access, and service coordination for long-term care. They will be run by existing or new organizations, as long as they are not currently direct providers of service.

Another aspect of the changing context is the *Report of the Provincial-Municipal Social Services Review (PMSSR)* (1990).² It recommends a new framework for managing and cost-sharing MCSS/municipal social services. Upper-tier municipalities would manage and cost-share two service envelopes: community support services (including services for the elderly and eventually community services for persons with

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disabilities) and child care. The provincial government would manage and fund three envelopes: income maintenance, children's (*CFSA* and *YOA*) services, and facility-based care for persons with developmental disabilities. A variety of delivery agents for these services would continue. Municipalities would also be responsible for development of a community social services plan, which would recommend priorities across all five service envelopes. Under the PMSSR model, agencies providing *CFSA* services would continue to be accountable to the MCSS area office, and municipalities would be relieved of their funding responsibilities for Children's Aid Societies.

A number of examples from current and past experience in Ontario illustrate the challenges of attempting to coordinate or integrate services provided by a range of independent service providers. In previous chapters, we have referred, for example, to the community school model in education and the *Better Beginnings, Better Futures*³ (1989) project of MCSS. In this section, the Committee discusses two other examples that seemed to us to provide some relevant insights for our deliberations.

1. Children's Services Committees

In the late 1970s, Ontario embarked on a developmental initiative in coordinating children's services at the local level. At about this time, the provincial government was consolidating a number of specialized services for children in a new Children's Services Division in MCSS. It was also implementing a new service planning process for children's agencies. The intention behind the creation of local Children's Services Committees (CSCs) was to devolve authority for planning, coordination, and allocation of resources for MCSS children's services from the provincial to the local level. However, the experiment was cancelled in 1982 before it was completed.

The project started out with four local CSCs and eventually grew to six. The committees were to have direct authority over MCSS services, and they were expected to forge links with other related services, such as health and education. There were variations in the exact composition and structure of the committees, but all of them included representatives of municipal government and service providers, and most also included consumers or citizens.

Before any of the experimental models reached the final phase in which they were to assume resource allocation responsibilities, the Minister of the day replaced the CSCs with a new model called the Children's Services Coordinating and Advisory Group (CAG). The

mandate of the new model was advisory only. Some CSCs continued their coordinating efforts as CAGs; some became part of broader social planning organizations, and others disbanded. MCSS provided some funding for formation of new CAGs in other communities. In 1990, there are about 18 local planning committees that focus on children's issues or on children's and other social and health issues. Most of them receive some funding from MCSS.

The CSCs were created as developmental models to work through the process of becoming local children's authorities. Their premature demise left a number of questions unresolved. One example is the accountability issue – how MCSS would exercise its responsibilities, particularly for statutory programs, if a local committee were responsible for resource allocation. There were also concerns about funding – municipalities were worried that a local children's authority meant they would have to assume more financial obligations for children's services. Reporting relationships had not been clarified, nor had some of the issues surrounding service standards and mandatory versus discretionary services.

It is difficult to pass judgement on an experiment that was cut off in midstream. However, it is worth noting that even in the short time in which the Committees were allowed to develop, there was considerable success in some or all of the pilot communities, in conducting community needs assessments and putting mechanisms in place to serve hard-to-serve children; in developing community partnerships and getting funders and providers to work together; in providing a highly visible focal point for advocacy and action on children's issues; and in developing formal links with ministries other than MCSS, and with local government bodies and other providers.

The Children's Services Coordinating and Advisory Groups that continue to operate do so in spite of the fact that they have no authority from the provincial government to do more than encourage collaboration among providers. Their relative success in bridging gaps between service agencies and ministries depends mainly on the goodwill and credibility they have built up in their communities.

2. Northern Directions and Integrated Services for Northern Children

Northern Ontario has special service delivery problems, notably scarcity of professional staff, long distances between scattered communities, and a small population base. The document *Northern Directions for the Delivery of Services to Special Needs Children and Their Families*⁴ (1988) provides an operational framework for a more coordinated

children's services system, adapted to conditions in northern Ontario. It proposes ways to link MCSS children's services provided by different agencies, either through integration under one administrative structure or through clarification of responsibilities and development of formal agreements. *Northern Directions* also emphasizes the need to link MCSS services with health, education, and other human service systems through agreements and protocols.

Implementing the policy in *Northern Directions* involves breaking down traditional barriers between agencies providing services. To accomplish this, district planning bodies have been formed, usually chaired by an MCSS area manager. In some instances, agencies have begun sharing some administrative resources, such as office space and support staff, and conducting some joint planning. In other areas, closer agency relationships are just beginning to evolve.

The Integrated Services for Northern Children project is a working model for inter-agency and interministerial coordination. It is intended to improve service access in remote and underserved areas, using six multidisciplinary teams based in Kenora, Thunder Bay, Sault Ste. Marie, Sudbury, Timmins, and North Bay and satellite offices in smaller communities. The teams are made up of professionals from agencies that fall under different jurisdictions – social services, health, and education. MCSS and the Ministries of Health, Education, and Northern Development (which has a variety of funding programs in the North) cooperate to remove bureaucratic or funding barriers to service provision.

Other Jurisdictions

The Committee also looked at some other jurisdictions. It is interesting to note that other jurisdictions are struggling with some of the same issues as those in Ontario, such as devolution or decentralization of functions to the local level and integration or coordination of social and other human services. It is helpful to study what is done elsewhere, but a transplant is rarely feasible. The issues may be similar, but service systems, political traditions, and geographic conditions are not. Goals and priorities are also different. With that in mind, we restrict ourselves here to brief comments on features of two other jurisdictions that we found to be of particular interest.

1. The British Columbia Experiment

In the early 1970s, the government of British Columbia embarked on two parallel experiments that involved integration of services and devolution of responsibilities to a local authority. Neither model ever had a chance to become fully operational across the province, and a

change of government in 1975 spelled an end to both. However, there are a few residual community organizations from that period still operating 15 years later.

One experiment involved creation of Community Resources Boards, elected by their local communities to determine the nature and form of social services in their area. In Vancouver, there were 14 separate boards, and one regional body that coordinated the efforts of the community boards. Members of the regional Vancouver board were appointed; they included representatives of the 14 locally elected boards, city council, and the school and parks boards as well as three appointees of the Minister.

The community resources boards were eventually to have responsibility for both statutory and non-statutory services, but most started out with planning and coordination of non-statutory services, which were usually delivered by non-profit groups receiving grants. However, the Vancouver regional board also took over statutory services, absorbing two existing Children's Aid Societies into its functions, as well as the municipal income assistance program.

The other experiment, launched by the Health Ministry, involved integration of health and social services at the community level through Community Human Resources and Health Centres, with elected boards composed of citizens and service providers. These centres, which never went beyond the prototypes in five communities (two of which survive), have been characterized as service supermarkets. They were to integrate all local health and social services, including family and children's services, public and mental health services, physicians' services, and provincial, municipal, and voluntary social services, and they were to link to other services, such as education and job training.

One of the conclusions that may be drawn from the B.C. experiment is how difficult it is to integrate or coordinate responsibilities at the local level if there is not a parallel effort at the provincial government level. It is also important to consider the compatibility of integrated or coordinated services. The merging of child welfare and income assistance in the Vancouver regional board is an example; about half of the child welfare cases had involvement with the income program, but only three per cent of income assistance cases were involved with the child welfare system. Concerns arose about how to ensure that non-statutory (discretionary) services would not be overwhelmed by statutory (mandatory) services if one community organization were responsible for both. There was also debate over how to strike a balance between empowering communities through local decision-making and ensuring provincial accountability through the parliamentary process.

2. New York Council on Children and Families

The New York Council on Children and Families acts as a coordinator of services for children and families at the state government level. The Council, which has been operating since 1977, has a mandate to get involved in issues which require action by two or more agencies of the state government. The top officials (commissioners and directors) of 14 state government agencies that provide services to children and families sit on the Council.

The Council does not provide services directly. Its role is to highlight issues and negotiate joint solutions that require cooperative action by state agencies. These agencies include, for example, the Departments of Health, Social Services, and Education, the Divisions for Youth, Probation, and Criminal Justice Services, and the Offices for Disabled Persons and Mental Health.

Much of the Council's political weight comes from the fact that it is chaired by the Secretary to the Governor of New York State and is often assigned specific issues to tackle in the Governor's annual "state of the State" message. Sometimes agencies themselves will bring an issue to be resolved to the Council table. The Council has been known to negotiate an agreement whereby one state agency gets out of a certain business, and another one buys in. The Council also publishes a "state of the child" report and pushes for legislative changes where necessary.

One of the strengths of the Council is its independence from the service system. The Council is considered a neutral party because it has no programs or turf of its own to protect. This also means, of course, that it has no power to implement programs or services on its own. Its authority must come from a high-level mandate that encourages decision-makers from across service systems to find collaborative solutions.

The Committee has emphasized throughout this report the critical importance of developing a new partnership in caring for children. We have looked at the new social and economic realities facing us and at the challenges that these changes pose for Ontario's service systems. We heard from our consultations and know from our own experience and research that the current disconnected network of services, as it is organized today, is unable to meet the entitlements of children. Service systems are stretched to the limit, and yet many problems of children are getting worse. A number of service planners and providers are trying to grapple with the challenge of addressing multiple needs and sharing scarce human and financial resources. But barriers between



different service jurisdictions and providers prevent development of an integrated response.

We recognize that solutions are not easy to achieve. There are no fail-safe models to follow. But we see an opportunity in today's environment to make some important changes in how we approach supports and services for children. Some momentum has already been created by the context of change in social and health services. New partnerships are being formed at the ministerial level and in communities. There is a growing capacity, through information technology, to link services and systems. There is considerable expectation among service agencies, community planners, municipalities, school boards, and others that now is the time to solve some old problems and put some new arrangements in place.

We are convinced that trying to foster voluntary collaborative measures or to coordinate disparate systems that have different objectives and accountabilities will fail to meet our paramount goal of meeting the entitlements of children. Voluntary collaboration, while certainly worthwhile, will not necessarily succeed in the long term because it is subject to the interests of those involved in continuing a cooperative relationship. Coordination efforts that attempt to bridge service systems have historically run into obstacles of protected turfs, conflicting values, and confused accountabilities.

If real progress is to be made in meeting children's entitlements, there must be a clear and unequivocal government commitment to a children's agenda, and structures must be put in place to ensure that a children's system is created. We concluded that to accomplish this, there must be a single children's authority in the provincial government that integrates responsibility for all major legislation, strategic planning, policy and program development, and funding of services for children. Complementing this body at the local level, there must be children's authorities that are accountable to their communities and to the provincial government for planning and managing a children's system.

We recognize that such fundamental change cannot be implemented overnight. It will involve a reorganization in the provincial government to integrate administration of children's services within a single authority, and it will involve creation of new structures for planning and systems management at the local level. It will require a rethinking of traditional mandates and legislative change.

One of the messages heard by the Committee during its consultations was that the kind of significant change that is needed will not happen without some structural changes to set the direction and follow through on implementation. We considered options for adaptations of existing

organizational structures but concluded that new structures are necessary. They will be built on the expertise and experience inherent in existing organizations, but they must represent a fresh start, with a clear mandate and direction for change. They must also reflect a sharing of responsibilities between the provincial government and local communities.

We are striving for solutions that are both visionary and practical. We propose a staged implementation process, with some interim steps to reach our goal. We hope the interim steps will be taken immediately. Some of the more radical changes can be made within two years. Other changes, such as those involving legislation, may take longer.

First, there must be a commitment from the provincial government. It is essential that the province demonstrate its leadership in creating a new public agenda for children – an action plan for meeting the entitlements of children – to guide and influence all government actions. To develop a children's system, there must be a shared vision across government ministries. We call this a public agenda, rather than a government agenda, because its implementation will not be restricted to government. We advocate a partnership between government, parents, and all others whose lives touch children.

Recommendation:

The Ontario government, in partnership with parents, service providers, and others whose lives touch children, must develop a public agenda to ensure that the entitlements of children are met. The agenda will guide future legislative, planning and policy development in all ministries that have a direct or indirect influence on supports and services to children.

An Integrated Framework

1. A Provincial Children's Authority

To implement this children's agenda, there must be a focal point for action within the provincial government. Responsibilities and accountabilities are now divided among several ministries. There must be a provincial children's authority that draws together responsibility for all the major services for children – social, educational, correctional, health, and recreational services, at a minimum – into a single entity with the power to implement programs and allocate resources. This would involve integration of the responsibilities and staff involved in services to children in five ministries: MCSS, Education, Correctional Services, Health, and Tourism and Recreation. The new authority would have its own Minister for Children.

The Committee considered alternatives to such a children's authority. For example, we looked at the potential of creating a children's

directorate to promote policies to support child entitlements across government. A directorate could review proposals for new programs or legislation drafted by various ministries and evaluate their impact on children. We also considered creating an interministerial body charged with finding ways to foster coordination among ministries in policy development, legislation, and other matters affecting children.

However, we are concerned that neither a directorate nor an interministerial body would have direct responsibility for service systems. Their role would be only to influence and make recommendations to the ministries that have direct authority for programs and funds. In our view, it is essential to have a children's authority that can implement change, that has responsibility for funding, and that has political weight within the government. There must be a Minister speaking in Cabinet on behalf of the entitlements of children who is able to bring proposals to reality through an authority that has the mandate and resources to make things happen.

Multiple lines of accountability among local service providers and provincial funders are one of the major problems impeding service integration at the local level. Integration of ministerial responsibilities will simplify those accountabilities and provide a more unified approach to children's policies and programs.

We are sensitive to the danger of creating an administration that would be big and unwieldy. We do not envision this authority becoming a mega-bureaucracy. Children's services are a relatively small part of MCSS, Health, and Tourism and Recreation. Most of the services for children under these ministries are not delivered by provincial employees. Staff in a variety of transfer payment agencies provide many of the MCSS children's services, and public health units or municipalities deliver many of the public health programs for children. Provincial staff in the Ministry of Correctional Services provide a number of young offender services, but the staff complement is not large. Education is the largest ministry that would be part of the new authority, but direct operational responsibilities for the school system rest with local school boards.

What we propose is a straightforward and clear solution to the fragmentation of mandates at the provincial level: amalgamate them. The integration of YOA services under MCSS has been advocated ever since the legislation was enacted and Ontario opted to separate children into two ministries on the basis of age. In Chapter 7, we recommended that jurisdiction for all young offender services be integrated legislatively under the *CFS*A and administratively under MCSS. MCSS and the Ministry of Health have already begun to integrate some of their

functions for elderly persons and persons with disabilities under the long-term care strategy. Our proposal takes their relationship a step further by integrating their children's services as well.

There is an affinity between education and child development because all children go to school. Many of the problems of children described earlier in this report manifest themselves at school. In Chapter 5, we advocated that the school be used, where possible, as a hub for a variety of services for children. It seems to us logical that the policy-making and funding for specialized services should be integrated with policy-making and funding for education.

The new children's authority will have a broad perspective on meeting the entitlements of children. It will provide a new focus for action to ensure that the whole network of services for children can work together.

We recommend the integration of ministerial responsibilities for children that are lodged in five ministries. We identify these as our priorities. However, there may also be other responsibilities, now resident in other ministries, that could become part of the integrated children's authority.

Recommendation:

The Ontario government must establish a provincial children's authority that integrates responsibility for all major legislation, strategic planning, policy and program development, and funding of services for children. This body must incorporate, at a minimum, ministerial responsibilities for children now lodged in the Ministries of Community and Social Services, Education, Correctional Services, Health, and Tourism and Recreation.

2. Local Children's Authorities

The other necessary part of an integrated framework is a children's authority at the local level. It is imperative that there be concerted action among providers and funders at the local level because that is where the actual service provision takes place. Integrated planning, policy development, and funding at the provincial level is an important component of the framework, but without integration at the local level, it will not have the necessary effect on services.

The Committee considered how best to achieve local integration. For example, we looked at a decentralized provincial model for local planning and systems management. In an MCSS context, this might be workable because the ministry has 13 area offices around the province and is integrating some of its management functions with the Ministry of Health in the long-term care offices. An MCSS management office

could be organized in each area to plan and manage integrated ministry-funded children's services. In northern Ontario, MCSS is already working with other ministries on joint service projects for children.

However, this Committee is intent on bringing together a system of social, educational, correctional, health, and recreational services for children across Ontario. This involves not only five ministry jurisdictions but also a complex array of managers, planners, funders, and providers at the local level. It involves another level of government – municipalities and school boards, which are locally elected and funded through local property taxes, as well as provincial grants.

Municipalities are involved in child care; they either run public health departments or have representation on public health unit boards. They also cost-share child welfare services and provide recreational programs for children. The boards of education and separate school boards manage and operate the school system. In the social services, there are Children's Aid Societies, Children's Mental Health Centres, and a range of other service providers. In the planning area, there are District Health Councils, Children's Services Coordinating and Advisory Groups, Social Planning Councils, and other such bodies.

In our view, a decentralized ministry management office could not adequately incorporate or represent the range of players at the local level. There must be a local authority that can overcome the fragmentation of decision-making and accountability.

It is important, in the Committee's view, to devolve authority for more children's services from the provincial to the local level. Education is already managed at the local level, but MCSS services are not. They are delivered mainly by local providers, but MCSS retains management authority through the area offices. We support a local children's authority that is accountable to its community. While provincial area office staff are part of their communities, they are ultimately answerable to their Minister. A local authority must also be accountable to the province for the funds it receives and for the fulfilment of its statutory and other responsibilities, but it will have a different relationship to the community than a government office. It will promote more community involvement in, and ownership of, children's issues. It will provide a community focal point for debate on children's issues and will encourage a wide range of people, including parents, to participate in planning for children's services. It will strengthen the ability of communities to participate in social and economic planning and promote community development activities, as we recommended in Chapter 6.



The local children's authority we recommend will integrate local planning, systems management, and allocation of resources for the children's system of services. The local authority will be governed by provincial statutes and the policies set out by the provincial children's authority. Because of the nature of some children's services, such as child protection, some services will continue to be highly regulated and standardized throughout the province, while some discretionary services may vary according to local need. There must be an accountability structure governing the authority's relationship to the provincial government and to the community that it serves.

We considered whether this children's authority should be part of, or responsible to, an existing local authority. It is unlikely that municipal government would welcome a major expansion of its role in children's services. The direction of the Provincial-Municipal Social Services Review suggested that municipalities should concentrate on child care and disentangle themselves from other children's services, specifically child welfare. The report recommended that municipalities be relieved of their cost-sharing responsibilities for child welfare, and this Committee agrees.

The 176 school boards in Ontario are closer to the model we seek because, adult education programs apart, their focus is on children. The new responsibilities for child entitlements could theoretically be assumed by the school boards, but not as they are now constituted. Their mandate is too narrowly education-oriented. The role of the school boards must be redefined to make creation of these new comprehensive children's authorities possible. The new authorities will have planning, systems management and resource allocation responsibilities that will include, but also extend beyond, the school system to social, health, correctional, and recreational services for children.

We do not want the new responsibilities for children to be considered just an add-on to the traditional role of the boards. It is important that this local authority be a *new* entity, with a significantly different interdisciplinary focus on services for children. It should not be dominated by the traditional biases of any of the services areas, whether they are in education, social work, corrections, recreation, or medicine.

We realize that adopting this proposal will require radical change. Legislative change will be required to constitute these new authorities. The relationship with municipalities as service providers and funders will have to be clarified.

We have not explored all the implementation issues, but we have brief comments on three. The first concerns what kind of authorities would be constituted: appointed or elected. We recommend local

elections. Control over expenditure allocations is best devolved to a body that has direct accountability to the electorate for its spending. While we do not believe that appointed bodies are by definition irresponsible users of funds, we are aware of the importance in our parliamentary tradition of linking spending authority to the ballot box. These authorities will therefore be answerable both to the local electorate and to the new provincial children's authority, which will provide grants for children's services.

The second issue involves the impact of these proposals on the local tax base. School boards now receive, on average, 30 to 40 per cent of their operating funds from the provincial government. This percentage varies according to the individual board – some boards are funded almost entirely by the province, while other boards depend almost exclusively on local property taxes. We are concerned that our proposal for new children's authorities not result in an increased burden for local taxpayers. There will have to be certain guarantees from the provincial government that the creation of these new entities will not result in additional financial responsibilities for local funders.

The third issue pertains to operational responsibilities. It should be clear that we are not advocating that this new authority assume direct service provision for all children's services. It makes sense to build on what is working now, and the current system has a variety of providers. However, given that one of the primary mandates of the new authorities will be to identify ways of meeting the entitlements of children in an integrated and holistic way, existing service organizations will have to learn to work together.

In addition, we are not suggesting that the elected members of these authorities be full-time, salaried administrators; they should operate as boards of governors of the children's system.

Recommendation:

The Ontario government must establish locally elected children's authorities that have responsibility for planning, systems management and resource allocation for social, educational, correctional, health and recreational services for children within their areas of jurisdiction. These authorities must be accountable to the provincial children's authority and to their communities.

Getting There: Interim Steps

We acknowledge that a great deal of developmental work will be required to implement the new provincial children's authority and local children's authorities. Therefore, we propose that interim structures be put in place to plan and implement the new children's system.

In the provincial government, we recommend formation of a Council

for Children, composed of Deputy Ministers from those ministries that are concerned with services to children. The Council must be charged with the task of implementing the children's agenda and getting the new children's system up and running. It should be phased out when the new children's authority comes into being.

The Council should include, at a minimum, MCSS and the Ministries of Education, Correctional Services, Health, and Tourism and Recreation; also valuable would be representation from the Ministries of Labour, Housing, and the Attorney General. The chair of the Council should be the Secretary of Cabinet. Because the creation of a new children's system will require a significant change in government organization and local structures, the Council should report to the Premier of Ontario. The Council will need staff support, and we suggest that staff be seconded from several ministries.

The Council's duties will include planning implementation of the new provincial children's authority, including all necessary legislative, administrative, and policy changes. We believe it should be possible to integrate the provincial functions within two years. The Council will also provide leadership in planning for locally elected children's authorities, including all the necessary legislative, administrative, and policy changes that they will entail. The Council will appoint interim local councils to carry out local planning, in anticipation of the creation of the new authorities. The Council will develop an accountability structure for the new authorities.

The Council will be responsible for coordinating ministerial activities in the period leading up to creation of the new provincial authority. For example, the Council will have to allocate resources for planning the new system at both the provincial and local levels. In addition to allocating developmental funding, it could use incentive funding to encourage integration projects using shared resources from several ministries (for example, pooling some special initiatives funding from MCSS and some compensatory education dollars from Education). The pooled resources could be channelled to the interim local councils.

The Council will also play an important role in promoting horizontal integration within ministries that sit at the Council table. There is much that can be done, for example, within MCSS to integrate *CFS*A services, child care, services to abused children, and other children's services that operate under the auspices of MCSS. This kind of integration will be a vital lead-in to the wider integration exercise with other ministries.

Developing an equitable and adequate funding formula for services to children must also be a responsibility of the Council for Children.

The way funding is now distributed across the province has more to do with tradition and history than with a viable funding system based on population, geographic size, needs indicators, and other factors affecting service requirements. We do not wish the new bodies to be seen as perpetuating past inequities. The level of funding must be sufficient to allow local authorities to meet the standards of service required by the province. More importantly, there must be some mechanism that ensures that local taxpayers are not forced to assume financial responsibility for services that are now provincially funded. Cost-sharing and funding formulas must be resolved before the new authorities become fully operational.

Another task of the Council will be ensuring development of a comprehensive information base for planning services for children. The Committee is aware that one of the serious deficiencies in children's services today is the lack of an adequate information base for planning. It is virtually impossible to evaluate the effectiveness of some programs because data are not compiled, not available, or not compatible with comparable data in other programs. If Ontario is to have an integrated system of services, it is imperative that information be readily available to planners. This information is essential for managing the system as a whole, for planning the allocation of funds, and for establishing accountability. The technology is available; it is a matter of harnessing it for the use of the system. Issues of protection of personal privacy must be resolved and appropriate regulations instituted where necessary to make information-sharing possible.



Recommendation:

The Ontario government must establish an interim Council for Children, with representation at the level of Deputy Ministers, to develop and implement policies and programs in the public agenda for children. The Council, chaired by the Secretary of Cabinet and reporting to the Premier, should include among its duties:

- planning implementation of the new provincial children's authority, including all necessary legislative, administrative, and policy changes;
- coordinating ministerial activities in the period leading up to creation of the new provincial authority, including integration of children's services within ministries;
- planning for locally elected children's authorities, including all necessary legislative, administrative, and policy changes;
- appointing interim local councils to carry out local planning;
- developing an accountability structure for the new authorities;

- developing an equitable and adequate funding formula for services to children;
- resolving cost-sharing issues with local government and developing a mechanism that will ensure that local taxpayers are not forced to assume financial responsibility for children's services that are now provincially funded;
- ensuring development of a comprehensive information base for planning services for children.

Interim local councils must be established to ensure that there is planning for a children's system in communities and that there is local input on how the new system should work. For example, there will be decisions to make in regard to catchment areas for the new local authorities. In northern Ontario, where geography is such an important factor, the makeup or scope of the authorities may have to be different from those in the heavily populated south.

Appointments to the local councils will be made by the provincial Council for Children. We suggest that representation be broad. There should be representatives of the key ministries involved, school boards, municipalities, service providers, and consumers. One of the keys to success will be the degree of support at the community level. In areas where there is a Children's Services Coordinating and Advisory Group, a Social or Inter-Agency Planning Council, a District Health Council, or some other vehicle that is dealing with children's issues, existing expertise and experience should be acknowledged and used to help develop the new system. In some communities, considerable work has been done on needs assessments and developing some links between service systems. We do not want the interim councils to waste effort reinventing the wheel.

These councils will be responsible for examining community needs and the existing configuration of services to plan how the children's system could work best. They will be guided by the public agenda for children. They will provide advice to the provincial Council that appoints them. They will build mutually supportive bridges to service systems and agencies. They will plan for integration of children's services within and among ministries at the local level. Although these councils will not have authority over resource allocation, they may be able to allocate some special funding, channelled from the provincial Council on Children through to the local area, to encourage projects promoting integration of services. Funding incentives are an important means of creating new approaches to service provision.

Like the provincial Council, the local councils should have a sunset provision that phases them out before the new elected authorities come into being.

Recommendation:

Interim local children's councils must be appointed across Ontario, with broad community representation, and a mandate to:

- plan local strategies for meeting the entitlements of children in an integrated and holistic way, in accordance with the public agenda for children in Ontario;
- plan for the establishment of local children's authorities and provide advice to the interim provincial Council on Children;
- identify options for integration or coordination of planning and system management responsibilities within and among ministries at the area office level;
- encourage greater integration of services through initiatives funding.

Conclusion

It is a special concern of this Committee that the entitlements of children receive the attention they deserve, not just within government and agency circles but among the general public.

The Committee sees the need for an advisory body, reporting to government on how the entitlements of children are being met throughout the system. The members of this Ontario Children's Advisory Committee should be appointed from outside government. An important part of its role will be sustaining the partnership among all those whose lives touch children.

The Committee will report to the Premier and produce an annual report to be tabled in the Legislature. The annual report will serve as a report card on the children's system, highlighting both progress and gaps. It will let the public of Ontario know the "state of the child" in this province.

The Committee, which will be independent of the service system, will act as a catalyst and advocate to focus attention on issues related to children's entitlements. It will review and comment on proposed new policies and legislation. It will also perform a public education function by fostering better understanding of the public agenda for children. The Committee will require some resources from government to ensure that it has the ability to fulfil its role.

This Committee should be established as soon as possible. It will provide valuable advice to government on implementation of other recommendations in this report.

Recommendation:

The Ontario government must establish as soon as possible an Ontario Children's Advisory Committee, with its members appointed from outside government, to advise the Premier and produce an annual report to the Legislature on how children's entitlements are being met. The Committee will serve to focus attention on, and foster public awareness of, children's issues and help sustain the partnership among all those whose lives touch children.

We are eager to see work on the public agenda for children and development of the new framework begin as soon as possible; but we also understand that the government will want to conduct consultations on this report. However, we urge the government to establish the provincial Council for Children as soon as possible and to give it the responsibility of supervising implementation of those parts of this report that receive government approval.

Recommendation:

The Ontario Council for Children should be given the responsibility of overseeing implementation of those aspects of this report accepted by the government.

The Committee acknowledges that there may be resistance from some quarters to the new framework that we have recommended. That is only natural when significant change is involved. We believe that if there is to be major change in the way children's entitlements are met, a new perspective must be created and some new momentum generated. The promise from a decade ago of the dawn of a radically new and more effective system for children remains to be fulfilled.

The Committee is convinced that many of those working with children, whether they are in schools or child care centres or the courts, in homes for children with developmental disabilities or health institutions, will welcome change. Among many of those who have been involved for years in services for children, there is frustration with piecemeal solutions that do not change much. At the same time, there is also weariness with high-sounding statements that produce no concrete results.

It is important to build on what is successful in the system now, to tap the willingness to work together and to create a well planned and integrated system. The 1990s will be an exciting time to be involved in children's services if we make it so.

1. Ontario Ministry of Community and Social Services, Ministry of Health, Office for Senior Citizens' Affairs, and Office for Disabled Persons, *Strategies for Change: Comprehensive Reform of Ontario's Long-term Care Services* (Toronto: Queen's Printer for Ontario, 1990).
2. Association of Municipalities of Ontario, Ontario Municipal Social Services Association, and Ontario Ministry of Community and Social Services, *Report of the Provincial-Municipal Social Services Review* (Toronto: Queen's Printer for Ontario, 1990).
3. Ontario Ministry of Community and Social Services, *Better Beginnings, Better Futures* (Toronto: Queen's Printer for Ontario, 1989).
4. Ontario Ministry of Community and Social Services, *Northern Directions for the Delivery of Services to Special Needs Children and Their Families* (Toronto: Queen's Printer for Ontario, 1988).



Chapter 9 Conclusion



We cannot turn our backs on our children. We must rally our efforts and resources to protect and nourish those who represent the future of society.

The time has come when what is morally right for children is also imperative, both economically and socially, for the continued viability of society as a whole. The evidence presented in this report illustrates that the cycle of disadvantage that children experience in the 1990s will inevitably have a profound impact upon future economic productivity and growth. There is an urgent need to guarantee children's entitlements in the present so that we as a society will be able to support ourselves in the future.

More importantly, when children are left to grow up in poverty, to grow up on the margins of our society, to suffer emotional pain and reduced life chances, we shame and diminish ourselves as a province and as a nation. As the United Nations Children's Fund (UNICEF) puts it in the *State of the World's Children 1990* report:

The essence of civilization is the protection of the vulnerable and of the future: children, like the environment, are both vulnerable and the future. Failure to protect the physical, mental and emotional development of children is the principal means by which humanity's difficulties are compounded and its problems perpetuated!

The Committee endorses the principle of "first call" that is advanced in the UNICEF report. That principle states that "the lives and the normal development of children should have *first call* on society's concerns and capacities and that children should be able to depend upon that commitment in good times and in bad," both "in times of prosperity and in times of recession."²

There is no child who cannot be touched by the stresses of our society. Risk factors such as poverty, child abuse, or alcoholism all have profound effects on children, and these may combine to produce an intolerable situation. Even one or two adverse experiences can harm the life chances of a child. Every child is, therefore, at risk of not developing to his or her fullest.

The vulnerability of children is further exacerbated by the disjuncture between new social and economic conditions and a service system that is still predicated upon outdated assumptions about "the family." We reviewed how the different services funded by the government could be combined into an effective system overcoming the divisions of responsibility, of territory, of self-interest that have grown up between those providing supports and services to children and their families.

We concluded that one cannot expect only governments and agencies to provide care. The care of children is a responsibility that falls first upon parents and then upon all of us. We began to think of partnerships between parents, and among those whose decisions affect children. This led us to imagine a rearrangement of our social system in which the interests of children are central.

It is in this spirit that we present the following vision for Ontario's children.

Vision Statement

We envision an Ontario in which children are valued as society's most important trust. In this society, upholding and safeguarding children's basic entitlements – the opportunity to develop, support for growth and protection from harm – are understood not only as a responsibility but as a privilege recognized and shared by all men and women.

We see the care of children as a partnership in which parents are supported in their efforts to raise children by others whose lives touch children. All members of the community promote the healthy development of children and respond to children in difficulties. Consequently, formal systems and informal care-givers join together to create an accessible, integrated, and flexible network of services for children.

We envision an Ontario in which all people foster the well-being and entitlements of children.

We believe that there is a window of opportunity at present to advance the agenda for children. The United Nations *Convention on the Rights of the Child* and the World Summit for Children have drawn international attention to the struggles of children throughout the world. Our federal government co-chaired the United Nations Summit and made a public commitment to create a centre of responsibility for children's issues within the federal government. More generally, a commitment was made to invest new resources in improving the conditions under which children live and develop.

The Committee hopes that in presenting this report and by calling it *Children First*, we will move the people of Ontario to action to ensure that all of Ontario's children enjoy happy and productive lives. We hope that the recommendations in our Report provide direction in this critical undertaking.

1. UNICEF, *The State of the World's Children, 1990* (New York: Oxford University Press, 1990), p. 7.

2. *Ibid.*

Appendix A Terms of Reference Advisory Committee on Children's Services September 1988

Purpose

The purpose of this project is to develop a strategic framework leading to an agenda for action for vulnerable children, youth and their families. (Vulnerability here refers to children who are at risk for significant and enduring social, emotional or behavioural problems, which in turn give rise to dependency on public resources over the course of development, particularly through the welfare, corrections, or mental health stream).

Objectives

- To develop directions for the broad range of public services in Ontario for vulnerable children and their families from a child development perspective.
- To develop prevention and early intervention strategies for vulnerable children and their families based on a collaborative, community-based system.
- To engage key stakeholders inside (the Ministry of Community and Social Services (MCSS) and other Ministries) and outside of government (publicly funded and non-publicly funded service providers, consumers and advocates) in the definition, development, and action of this strategic framework.

Background

- The past decade has concentrated on the consolidation of children's services and the development of a legislative framework – *Child and Family Services Act*.
- The Act represents a major step in the Ministry's efforts to achieve a more effective and efficient children's services system within an articulated philosophy of service and sets out a number of principles to guide us.
- The Act has provided the opportunity for the development of flexible services (a concept of a service delivery system based on categories of service) which should enable children to have their needs met rather than being fitted into narrowly defined program mandates.
- There is a general perception that the past ten years have seen considerable improvements in service delivery.
- Problems and needs of children are becoming more complex and the system has not developed capacity to respond as effectively as it might.
- Now dealing with runaways, latchkey children, juvenile prostitutes, homeless young people and dramatic increases in numbers reported.
- Despite a more flexible funding framework, the children's system still tends to be fragmented by agency mandates reflective of previous legislation.
- Gaps exist in some communities, and there is duplication in others indicating the ongoing need for planning and linkages across service sectors.
- Linkages to other systems such as health, education and community and self-help organizations are required for interventions to be fully effective.
- The time is now opportune to take stock. To fully operationalize the intent of the Act and move to a more collaborative and responsive system of children's services, we must stand back, develop a comprehensive overview of the issues and problems, and set new directions accordingly.

Issues

Societal Pressures

- While Ontario is currently experiencing an upturn in the economy, we continue to experience geographical unemployment problems and systemic cycles of unemployment among some sectors of the Province.

- Incidence of teen pregnancies continues to rise. Mothers who keep their children are often at high risk.
- Affordable accommodation in the Toronto Area is largely unavailable for the most vulnerable families.
- Abuse of children by family members continues to be high with increasing incidents of violence. The role of the family and our traditional beliefs about its sanctity need to be assessed.
- Ontario is increasingly a multicultural society with nearly one hundred ethno-cultural communities represented in the Province. Increased efforts are required to make the service system more sensitive to a multicultural society and to Native people in particular.

Program Management Concerns

- Although the number of children in care has declined dramatically, there have been significant increases in protection and prevention cases – why?
- Children in long term care are seen as vulnerable and harder to serve. There is a need for permanency planning and strategies to deal with the transitional problem.
- Many children in care who are moving from placement to placement have become a displaced population, without stability. These young people are often on the streets and lack self esteem, job and life skills and any significant relationship with caring adults to give them a sense of support.
- The long term effects of family violence on children – many are emotionally abused and may themselves become abusers.
- Emphasis on children's rights has, for some, "legalized" the child welfare system. The preparation of forms and attending to legal considerations has become a dominant focus of service provider activities.

Systemic Problems

- Research efforts have made a good start at providing reliable and in depth information on the health and social service needs of Ontario's children. The Ontario Child Health Study (OCHS) data indicate large numbers of children are at substantial risk.
- Many children still suffer poor health and have learning disabilities, but very few of them are reached by public health, child welfare or mental health systems.
- Services are not currently designed to recognize the strong relationships among outcomes and effects on other systems – e.g. a service to help a child with a psychiatric disorder that does not include intervention for academic difficulties will be incomplete.
- Key systems in the lives of children at risk are school, family doctor and public housing. Data indicate that "single parents", "on welfare" in "subsidized housing" can be strong markers for mental health and social service needs.
- There is insufficient assessment and evaluation of the effect of prevention and early intervention of health/social service problems. It is critical that resources are concentrated on those children who *most need them*.
- Services must be designed to meet client and community needs; people should not be forced to fit into established program mandates.

- Programs of other Ministries, in particular, Education, Health, Housing, Skills Development and Recreation either impact or have the potential to impact on the future deployment of children's services. Collaboration and targeting of broader provincial resources are key to effective prevention and/or intervention to families/ children at risk.

Outcome

If a community based flexible service system for services to children is to be achieved, a system where:

- 1) the principles of the Act are fully operationalized;
- 2) there is collaborative ownership and formal linkages between service providers;
- 3) there is case responsibility;
- 4) services are culturally responsive;
- 5) *our* resources are managed effectively and ensure that children at risk are targeted; and
- 6) prevention and therefore reduced service is a guiding principle.

It is necessary to examine the impact of the various pressures on our service systems, analyze the various data, and take into account initiatives within and outside the Ministry.

The outcome will be new directions and shared strategies for children's services in the 90's. The process of development and implementation of the new directions will actively incorporate the shared commitment of MCSS, other Ministries, and service providers from all sectors.

Methodology

General

- Assessment of current situations relevant to intent;
- Analysis/documentation of issues;
- Environmental assessment of trends;
- Literary search of other jurisdictions;
- Determination and recognition of what is working in Ontario/models of collaborative planning.

Specific

The goal and the process of developing strategic priorities for children's services must be perceived as a government priority and communicated as such through the system including other line agencies, the police, the judicial system, etc.

The new agenda for services to children in the 90's will be developed in part through consultation with an Advisory Committee chaired by Dr. Colin Maloney, Executive Director of the Catholic Children's Aid Society of Metropolitan Toronto.

Key Assumptions

- The dollars are limited. A substantial expansion of services both for economic and policy reasons is not perceived as a creditable solution. Part of the intent of the process is to ensure the credibility of funding, the cost effectiveness of programs and the collaborative use of funds.
- The data indicate that the children's services system is serving a small portion of the population which appears to require services. The system must examine whom it is serving and whom it should serve.

- The children, youth and families at risk must be viewed by the various systems serving them as a shared responsibility; only through collaborative mechanisms can we hope to provide required services.
- The project, essentially, looks in two directions: first, at the services provided by MCSS principally through *The Child and Family Services Act*, and second, at the network of children's services provided under various auspices so that collaborative approaches to service may be developed.
- The directions developed for child treatment and child and family intervention with their strong emphasis on targeting, prioritizing and local community planning will be the basis of directions developed for all of children's services.
- Joint Policy and Operations commitment are necessary for the successful development of the project.

Process

- Preliminary review of key documents, interviews with key informants, within and outside the Ministry (including other branches, Operations, Area Managers, Ontario Association of Children's Aid Societies, etc.).
- First draft of Terms of Reference.
- Development Team established.
- Consultation and review of Terms of Reference with Regional Directors, Area Managers, and Children's Aid Societies and other key service providers.
- The involvement and commitment of other Ministries sought through Deputy Ministers.
- Advisory Committee formed, is briefed on current initiatives within and outside the Ministry, reviews current and emerging issues, explores implications of data, focuses on process, advises on the feasibility of proceeding with a Strategic Priorities Day and/or establishing Reference or Focus groups.
- Policy Forum in Fall to explore the general activities, process and directions of the overall project.
- Broad consultation on issues and input on possible directions through the Strategic Planning day or series of focus groups under the auspices of regions, areas.
- First draft of Strategic Framework reviewed first by Development Team, Minister, Deputy Minister, Operations Division and key service providers.
- Ministry of Community and Social Services Development Team reviews draft for Policy Implications.
- Follow up consultation committees paralleling Advisory Committee established through areas to review directions, provide input to Committee.
- Strategic Framework redrafted.
- Reviewed by Development Team.
- Approval of Minister, Deputy Minister.
- Go through Cabinet process.
- Publication of Strategic Framework.

Advisory Committee on Children's Services

Governing Principles

- Persons on the committee should bring to the task more than one dimension.
- Should be creative and well known in the field for their broader vision.
- While some may represent organizations, each should be chosen for his/her individual qualifications.
- All interested organizations need not be represented: Focus/Reference Groups will provide ample opportunity for all to provide input.

Composition

Geographical representation and language/cultural representation will be taken into account.

The Advisory Committee will be composed of approximately 10 – 15 persons.

Function

- To draft Strategic Framework for children's services in the 90's.
- Explore implications of issues and current trends for service directions.
- To identify strategies for more effective targeting of services in the context of various data sources available to identify children, youth and families at risk.
- Identify strategies to enhance the concept of the family in the children's services system.
- Strategize around creating a service system network which will share understanding and responsibilities across service sectors and Ministries.
- Identify research needs.
- Determine strategies for the more effective and efficient use of existing resources.

Appendix B Staff – Advisory Committee on Children’s Services

Project Manager:	Carole Skinner
Project Coordinator:	Maureen Reilly
Researcher:	Katherine Scott
Writing/Editing Team:	Carole Skinner Katherine Scott Cheryl Hamilton
Support Staff:	Craig Shields (Background for Chapter 4) Frances Forrester Gabrielle Lenk Donell McDonell Frances Tanasychuk
Advisors:	Sandra Scarth, Director, Children’s Services Branch Marc Topham, Manager, Children’s Services Branch Former Project Manager Terry Sullivan, Acting Executive Director, Premier’s Council on Health Strategy Former Project Manager

The Advisory Committee on Children’s Services was supported by the Children’s Services Branch, Ministry of Community and Social Services.

Appendix C Development Team

The Development Team was made up of government personnel representing key branches within the Ministry and representatives from other Ministries.

Sandra Scarth	Director, Children’s Services Branch
Marc Topham	Manager, Children’s Services Branch
Sue Herbert	Director, Operational Coordination Branch
Ernie Nelson	Area Manager, Southeast, Kingston Area Office
Kay Eastham	Director, Child Care Branch
Vicki Bales	Former Director, Family Support Branch
Jon Kelly	Former Director, Services for Disabled Persons Branch
John Garcia	Head Policy Development, Health Promotion Branch, Ministry of Health
David McKee	Director, Special Education and Provincial Schools Branch, Ministry of Education
Celia Denov	Former Director, Policy and Research Branch, Ontario Women’s Directorate
Colin Maloney	Chairman, Advisory Committee on Children’s Services

Representatives from the following Ministries were also invited to attend the Development Team meetings as appropriate.

Housing	Skills Development
Recreation	Attorney General
Culture	Solicitor General
Citizenship	

Function

- To set parameters of the task.
- To review draft TOR including specific objectives, staffing, time frames.
- To guide development of the project.
- To advise on issues and problems which may arise.
- To review status reports and written materials.
- To review strategies as they are developed and recommend for approval.
- To liaise with Advisory Committee and senior management.

Appendix D Consultations

In the course of its work the Advisory Committee on Children's Services consulted with a number of individuals and groups in the children's services field. The people and the positions that they occupied at the time of the consultation are listed below.

Consultation on Government Initiatives

George Thomson	Chairman, Social Assistance Review Committee
Rix Rogers	Special Advisor to Minister of Health and Welfare on Child Sexual Abuse
Terry Sullivan	Senior Policy Analyst, Children's Mental Health, Children's Services Branch, MCSS
Dan Offord	Professor of Psychiatry, Head, Division of Child Psychiatry McMaster University Research Director, Chedoke Child & Family Centre National Health Scientist
Marilyn Knox	Executive Director, Premier's Council on Health Strategy
Stephen Hagarty	Community Concern Associates, Ltd., Local Children's Service Advisory Committees
Nora Spinks	Children's Coordinator, North York Interagency Council
Faye More	Program Supervisor, MCSS, Provincial Municipal Social Services Review
Sandra Lang	Executive Director, Strategic Planning and Intergovernmental Relations, MCSS, Provincial Municipal Social Services Review, Long Term Care Services Review

Consultation on Infancy Issues

Nancy MacNider	President, Maternity Homes Association of Ontario
Richard Schabas	Director of Public Health, Ministry of Health
Karen Kaufman	Implementation Coordinator of Midwifery, Women's Health Bureau, Ministry of Health

Consultation on the Role of the Physician

Yves Tourbout	Chief of Family Medicine, Mount Sinai Hospital, Toronto
Marcia Mian	Director of S.C.A.N. (Child Abuse) Team, Hospital for Sick Children, Toronto
Ken Finkel	Department of Pediatrics, McMaster Faculty of Health Sciences Ontario Medical Association Child Welfare Committee

Consultation on Child Care

Kay Eastham	Director, Child Care Branch, MCSS
Trish Baynham	Policy Analyst, Child Care Branch, MCSS
Julie Mathien	Education Officer, Curriculum Policy Development Branch, Ministry of Education
Betty Kashima	Executive Director, Macaulay Child Development Centre
Irene Kyle	Executive Director, Canadian Mothercraft Society

Consultation on Prevention

Carol Russell	Senior Research & Policy Advisor, Better Beginnings, Better Futures Project, Children's Services Branch, MCSS
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Consultation on School Age Children

Veronica Lacey	Director, North York Board of Education
Landon Pearson	Chairperson, Canadian Council on Children and Youth
Wally Beevor	Assistant Deputy Minister, Learning Programs, Ministry of Education
Alan Wolfish	Director of Legal Services, Ministry of Education

Consultation on Native Children

Marlene Castellano	Chair of Native Studies, Trent University
Micheal Hardy	Executive Director, Dilico Ojibway Child and Family Services
Joanne Sault	Association of Iroquois and Allied Indians
Susan Rudnick	Policy Analyst, Native Children Services, Children's Services Branch, MCSS

Consultation on Adolescents at Risk

Michael Clarke	Evergreen Youth Centre, Yonge Street Mission, Toronto
Cathy Leard	Nursery Coordinator, Jessie's Centre for Teenagers, Toronto
Evelyn Kent	Executive Director,
Anne Barrett	Education Coordinator, Planned Parenthood of Ontario
Miriam Ross	Adolescent Medicine Clinic, Hospital for Sick Children, Toronto
Gillian Doherty	Doherty Social Planning Consultant, Consultant to Ontario Anti-Drug Secretariat
Peter Murchison	Senior Policy Analyst, Ontario Anti-Drug Secretariat

Consultation on the Transitional Age Youth

John Myles	Professor, Department of Sociology, Carleton University
Jan Rush	Assistant Deputy Minister, Skills Development Division, Ministry of Skills Development
Barbara Barrows	Supervisor, Counselling, Youth Employment Services, Toronto

Consultation on the Young Offenders Act

Tony Doob	Professor, Centre for Criminology, University of Toronto
Alan Lescheid	Assistant Director, London Family Court Clinic Ltd.
Brian Weagant	Executive Director, Justice for Children
Marilyn Renwick	Executive Director, York Detention Centre, Toronto
Paddy Colfer	Policy Analyst, Young Offenders Services, Children's Services Branch, MCSS

Consultation on Children's Mental Health

Sheila Weinstock	Executive Director, Ontario Association of Children's Mental Health Centres
Martin Girash	Director, Windsor Western Hospital Regional Children's Centre, Windsor
Dorothy Easton	Director, Kinark Child and Family Services, Toronto
Phil Ogden	Director, Beechgrove Regional Children's Centre, Kingston
Andre Guitard	Director, Centre Jeanne Sauvé Centre, Kapuskasing
Ken Goldberg	Director, Earls court Child and Family Centre, Toronto
Laurie Dart	Executive Director, J.D. Griffen Adolescent Centre, Toronto
Tom Walters	Executive Director, Lakehead Regional Family Centre, Thunder Bay
Rod McLeod	Head of Department of Psychiatry, Child & Family Centre, Chedoke-McMaster Hospital, Hamilton
Susan Bradley	Psychiatrist-in-Chief, Hospital for Sick Children Head of Division of Child Psychiatry, University of Toronto

Conferences and Workshops

Representatives of the Advisory Committee on Children's Services gave presentations to participants at the following meetings and conferences:

- Ontario Indian Social Services Council Conference on Primary Prevention
- Annual Conference of the Ontario Association of Children's Aid Societies
- Annual Conference of the Ontario Association of Children's Mental Health
- Sparrow Lake Alliance (Individuals concerned with service delivery issues in the children's services field.)
- Education Directors Group (Representatives of directors of education from around the province)

Appendix E Written Submissions

The Advisory Committee on Children's Services received submissions from the following groups:

- Justice for Children
- Metro Special Committee for the Prevention of Child Sexual Abuse
- Office of Child and Family Service Advocacy, Ministry of Community and Social Services
- Ontario Contract Observation and Detention Homes Association
- Ontario Institute for the Prevention of Child Abuse
- Ontario Medical Association
- Ontario Municipal Social Services Association
- Ontario Public School Boards Association
- Ontario Teachers' Federation
- Ontchild – Ontario Association of Children's and Youth Institutions
- Probation Officers Association of Ontario

Appendix F Background Papers

The following background papers were commissioned by the Advisory Committee on Children's Services and prepared by staff and external consultants:

Stephen Hagarty, Community Concern Associates Ltd., "Child Welfare: A Background Paper on CAS Front-End Services," January 1990.

Brigitte Kitchen and Corinna Kitchen, "Sharing the Care: A Strategy for the Harmonization of Work and Family Life," March 1990.

Harvey Savage, "Vulnerable Children and their Families: A Search for Appropriate Legislative and Policy Responses," November 1989.

Katherine Scott, "State of the Child in Ontario," September 1989.

Appendix G Photo Credits

The Advisory Committee on Children's Services would like to thank the following for allowing their pictures to be published in this report:

The YMCA of Metropolitan Toronto

The Art Gallery of Toronto

The Toronto Board of Education

The York Board of Education

John De Visser

Daniel Dutka

Bob Clark

Appendix H

Summary of Recommendations

Chapter 5

Promoting Well-Being and Healthy Development

Goal 1: Promoting the well-being of children and defending their entitlements must become society's highest priority.

A Public Commitment to Promoting Well-Being

The provincial government should engage in a campaign, of the magnitude of Participation, to increase public awareness and support for promoting the entitlements of children.

A Service Response to Child Entitlements

Mainstream services, including schools, public health, recreation and child care, should become the pivotal point for organizing a service response to the entitlements of children. Specialized services must organize their activities in relation to these mainstream services, through formalized linkages.

Children should be maintained within their natural environments of home, school and community, to the greatest degree possible. This will require the specialized services to commit resources for crisis intervention, and the development and training of new skills and strategies to support children in their normal settings.

MCSS must rationalize its fragmented system of services at the same time as it builds linkages with mainstream service providers.

The provincial government should promote models of service integration and collaboration which simplify access to service and rationalize the roles of our limited resource of trained specialized service providers.

The School as a Hub for Delivering Supports and Services

There must be a single major physical centre which operates as a hub of services for children within communities. Where possible, the school should be this locus of service providers.

Supporting Families

Accessibility of specialized services must be improved through the development of single entry points within communities which can coordinate assessment and service delivery. Accessibility must also be improved by increased flexibility in hours of service and methods of service delivery.

The provincial government should develop a comprehensive child care policy with a timetable for the broad-scale expansion of child care facilities, as well as other child care options for working parents and their children.

Employers should accommodate the competing demands of workers with family responsibilities, by easing the time strain of employment hours wherever possible, through the implementation of such options as part-time work or job sharing; flex-time and working at home; sick-child-care leave and personal family leave.

When Problems Emerge

An independent program of research and demonstration projects must be funded to provide information about early problems and later dysfunction, as well as evaluative information about the success of intervention efforts. In conjunction

with the development of a comprehensive data base, this will permit the targeting of effective interventions for children.

Child welfare agencies must have the funding flexibility to implement alternative strategies to residential placement.

Respect for Diversity

All service providers should work directly with community members to create accessible and responsive services which address the unique cultural, ethnic, racial, religious, linguistic, and regional diversity of Ontario's population. This will require greater representation of minority groups on agency boards of directors.

In light of the new *French Language Services Act*, the provincial government should provide resources for training and staffing to enable adequate implementation of the Act.

Designated resources must be provided to promote natural helping networks and to train indigenous workers in isolated rural and Northern communities in order to develop and support community models of service delivery.

Government and Native communities should increase their mutual efforts to develop models of service delivery which are native specific and which address the unique needs of native children. This will eventually involve transfer of management of children's services to local native organizations and agencies.

The provincial government, in concert with the federal government, should develop processes and establish working groups to maximize the involvement of Native people in the determination of policy, in research and in program planning.

The Federal-Provincial cost sharing for services for Native children should be reviewed and modified to support the delivery of promotional and preventive services, within Native communities, provided by Native organizations.

A Developmental Context for Promoting Well-Being

1. Parenting

Substantial efforts must be undertaken through education and improved birth control to reduce adolescent pregnancy.

The parenting capacity of adolescents must be enhanced through improved prenatal care, parent training and adequate day care to allow the adolescent to pursue school or work options.

2. Prenatal Stage

Prenatal services should be expanded and the outreach capacity of public health should be enhanced to ensure that all pregnant women have access to high quality prenatal care.

3. Infancy

The province should establish a province-wide network of well-baby services, which would include public health nurses with an expanded outreach and support role, family resource centres, and self help networks. Incentives for using such services should be considered.

A range of child care options must be made available to parents during infancy, including the availability of extended (12 to 18 months) paid parental leave, shareable by both parents.

4. Preschool Years

Child care facilities should be located within communities, wherever possible within the local school building.

5. Early School Years

The provincial government, in conjunction with local school boards and schools, and with other service providers must institute year-round programming for children in their community.

Service providers must increase their capacity for the early detection of emerging problems. High quality intervention and treatment services should be available within the normal home and school settings as soon as problems are detected.

When a child's entitlement to freedom from harm is in jeopardy, protection services must be able to respond quickly and with appropriate intensity to restore safety for the child.

6. Adolescence and the Transitional Years

Service providers must utilize their resources for crisis intervention and family preservation strategies to enhance their ability to keep children within their families where possible.

Youths between the ages of 16 and 18 must have the right to request protection and child welfare agencies must be mandated to respond.

Chapter 6

Building an Economic Base for Children

Goal 2: An equitable economic base must be created that enables families and communities to provide for the entitlements of children.

Income Transfers

The provincial government must move to implement the recommendations of the Social Assistance Review Committee Report, specifically as they pertain to children and their families.

The provincial government should negotiate with the federal government to design and implement a universal income program for children based on the minimum costs of raising children.

The provincial government should implement a provincial supplementary child benefit program for children in families below the provincial median income level.

The provincial government must immediately review the tax system in Ontario in order to assess its impact on families and take steps to create a more equitable system. The government should also urge the federal government to restore full indexation of family allowances and the refundable child tax credit and to abolish the non-refundable children's credit as part of federal efforts to achieve greater inequity in the tax system.

The provincial government must move to integrate income support, including emergency funding for children and their families in temporary need of financial support, with other service areas so as to serve children and their families in a more integrated way.

The provincial government must develop a firm timeframe for the elimination of child and family poverty in Ontario.

Child Support

The provincial government must establish a fixed schedule of support payments to guide the determination of child support obligations. This schedule should seek to ensure that children are able to enjoy the standard of living which they would have had if their parents had not separated. The schedule must be fully indexed to the cost of living.

The provincial government must strengthen and expand the capacity of the public maintenance advance system in order to provide a minimum guaranteed income to children and their families in all instances where the supporting parent either fails or is unable to meet court-ordered support obligations.

The provincial government must amend personal income tax regulations that require custodial parents to pay tax upon child support payments to remove the burden of double taxation upon the parent and should urge the federal government to take similar action.

Transition from Adolescence to Adulthood

The provincial government must work to consolidate supports and services to transitional age youth, including financial assistance, bridging interministerial and intergovernmental program barriers.

The provincial government must review minimum wage rates, the availability of benefits and the working conditions of part-time labour in order to legislate greater protections for young people in the labour market.

The provincial government in conjunction with local community representatives must expand cooperative education and apprenticeship programs for youth and establish support programs for these students that would include financial assistance and housing where necessary.

The provincial government must encourage employers and labour organizations to invest in young people by increasing training opportunities and supporting community economic development through financial incentives and other measures.

Community Development

The provincial government in conjunction with community representatives must develop and strengthen the capacity of communities to participate effectively in social and economic planning and management of activities at both the provincial and local levels.

The provincial government must require which organizations that receive government funding incorporate a community development component into the structure of their support or service. Where there is no direct funding relationship, the government should provide incentives to other representatives of the community to support community development initiatives.

Goal 3: Laws that affect children directly or indirectly must be written or amended to give force to and express the entitlements of children.

Legislative Principles and Entitlements for Children

The entitlements of children must be incorporated in all existing and new legislation and also in policy that directly or indirectly affect the lives of children.

The provincial government must immediately ratify the principles embodied in the United Nations *Convention on the Rights of the Child* and urge the federal government of Canada to do so also.

Inconsistencies within Children's Legislation

1. Tests and Standards

All relevant legislation should be amended to reconfirm that the “best interests of the child” is the predominant test to which the child is entitled at every stage of contact with the courts or mandatory services.

2. Placement

Legislation involving the placement of children, notably the *CFSA*, must be amended to require a primary guiding principle of consistency of caring relationships within a child's “familiar” community, where consistent with the best interests of the child.

3. Procedural Rights

All legislation affecting children and their families should be critically evaluated in order to establish legislative consistency with regard to age, access to judicial review, legal counsel, therapeutic assessment and the entitlement to participate in reviews determining their benefits and/or liberties.

Judicial Discretion and the Court System

The provincial government should create a Unified Family Court at the superior level, where each judge will be vested with broad powers and discretion to rule in the best interests of the child at all times.

Young Offenders

The young offenders system in Ontario should be integrated judicially, administratively and philosophically. The provincial government should amend the *Child and Family Services Act* to include all children aged 12 through 17 in Part IV dealing with young offenders. Responsibility for 16 and 17 year-old offenders should be transferred from the Ministry of Correctional Services to the Ministry of Community and Social Services.

The provincial government must make a commitment to develop a full-fledged program of alternative measures as provided under the *Young Offenders Act*.

The provincial government must amend the *Provincial Offences Act* to incorporate provisions for diversion programs for young people similar to provisions in the *Young Offenders Act*.

The provincial government should request the federal government to amend Section 22 of the *Young Offenders Act* to provide a better balance between the rights of the individual to refuse invasive treatment and the rights of the community to protection.

The provincial government must reexamine bail directives for young offenders to ensure that the test of connection to the community is not more stringent than the one applied to adults.

Other Policy Recommendations

The provincial government should press the federal government to amend Section 43 of the *Criminal Code* to prohibit anyone, including parents and teachers, from using corporal punishment upon children.

The provincial government must immediately establish a truancy philosophy and enact appropriate legislation embodying the entitlements of children in order to ensure continuity of care for children within their “familiar” communities.

Chapter 8

An Integrated Framework for the Children's System

Goal 4: Government must become the leading partner in creating a public agenda for children and in establishing an integrated and holistic framework of supports and services to ensure that the entitlements of children are met.

A New Agenda for Children

The Ontario government, in partnership with parents, service providers and others whose lives touch children, must develop a public agenda to ensure that the entitlements of children are met. The agenda will guide future legislative, planning and policy development in all ministries which have a direct or indirect influence on supports and services to children.

An Integrated Framework

1. A Provincial Children's Authority

The Ontario government must establish a provincial children's authority which integrates responsibility for all major legislation, strategic planning, policy and program development and funding of services for children. This body must incorporate, at a minimum, ministerial responsibilities for children now lodged in the Ministries of Community and Social Services, Education, Correctional Services, Health and Tourism and Recreation.

2. Local Children's Authorities

The Ontario government must establish locally elected children's authorities which have responsibility for planning, systems management and resource allocation for social, educational, correctional, health and recreational services for children within their areas of jurisdiction. These authorities must be accountable to the provincial children's authority and to their communities.

Getting There: Interim Steps

The Ontario government must establish an interim Council for Children, with representation at the level of Deputy Ministers, to develop and implement policies and programs in the public agenda for children. The Council, chaired by the Secretary of Cabinet and reporting to the Premier, should include among its duties:

- Planning implementation of the new provincial children's authority, including all necessary legislative, administrative and policy changes;
- Coordinating ministerial activities in the period leading up to creation of the new provincial authority, including integration of children's services within ministries;
- Planning for locally elected children's authorities, including all necessary legislative, administrative and policy changes;
- Appointing interim local councils to carry out local planning;
- Developing an accountability structure for the new authorities;
- Developing an equitable and adequate funding formula for services to children;
- Resolving cost-sharing issues with local government and developing a mechanism which will ensure that local taxpayers are not forced to assume financial responsibility for children's services that are now provincially funded; and
- Ensuring development of a comprehensive information base for planning services for children.

Interim local children's councils must be appointed across Ontario, with broad community representation, and a mandate to:

- Plan local strategies for meeting the entitlements of children in an integrated and holistic way, in accordance with the public agenda for children in Ontario;
- Plan for the establishment of local children's authorities and provide advice to the interim provincial Council on Children;
- Identify options for integration or coordination of planning and system management responsibilities within and among ministries at the area office level; and
- Encourage greater integration of services through initiatives funding.

Conclusion

The Ontario government must establish as soon as possible an Ontario Children's Advisory Committee, comprised of members appointed from outside government, to advise the Premier and produce an annual report to the Legislature on how children's entitlements are being met. The Committee will serve to focus attention on, and foster public awareness of, children's issues and help sustain the partnership among all those whose lives touch children.

The Ontario Council for Children should be given the responsibility of overseeing implementation of those aspects of the report accepted by the government.

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